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S73
p9
Entered at the Post Office at Nashville, Tennessee, as second-class matter.

YEARLY SUBSCRIPTION \$1 IN ADVANCE.

Vol. 12.

SEPTEMBER, 1890.

No. 9.

B212751 C

THE

Southern Practitioner,

AN INDEPENDENT MONTHLY JOURNAL,

DEVOTED TO MEDICINE AND SURGERY.

NASHVILLE, TENNESSEE.

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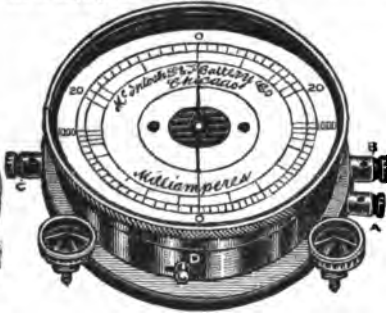
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DEERING J. ROBERTS, M. D., - - Editor and Proprietor.

Vol. 12. NASHVILLE, SEPTEMBER, 1890. No. 9.

Original Communications.

FALLACIES IN MEDICINE.

ANNUAL ADDRESS BY J. S. CAIN, M. D.,

*Professor of Principles and Practice of Medicine with Clinical Medicine and
General Pathology, Medical Department University of Tennessee; and
President of the Nashville Academy of Medicine.*

Mr. President and Fellows of the Association:—The subject upon which I am about to deliver to you an address at the close of my official term as your presiding officer, is one of your own selection and not of my choosing, and probably would not have been selected if left wholly to my choice, for the very nature of the subject implies that fallacies do exist in our profession, and he who points them out by either designating the fallacy, or the perpetrator, must necessarily assume, to some extent, the character of a critic for which nature and inclination both unfit me.

A fallacy may be defined according to the best English lexicographers, as something which deceives or misleads, close akin is sophistry or false and misleading argument, deception or false acting. Mr. Webster gives even a more latitudinous definition of fallacy, and would allow it to mean an error or mistake.

Then, I think that I may under license of this definition, say, all such matters in the profession which are calculated to deceive or mislead its members or the public, or which may have a tendency to divert professional thought or action, from the straight and beaten path of legitimate medicine, may properly be termed fallacies. All actions, theories and teachings which bear not upon their front, the blazonry of ungilded truth, whether the result of design, ignorance, superstition, or the blind and obedient following of precedent or teaching, must be tried by the same unerring test and stand or fall according to this rule.

Another theorem which I would lay down for the guidance of our reasoning upon this subject, is: whatever is wrong or fallacious, if practiced by the profession as a whole, is equally wrong, if done by an individual member. This will often aid us in arriving at conclusions as to the propriety of individual actions, which are often condoned and looked over on account of individual popularity or personal influence. Ask yourselves how would such actions appear if indulged in by the entire profession?

It is clear that fallacies in medicine may be divided into two primary classes. One belonging to the honest followers of the profession, who act from conscientious motives, no matter how misled they may be, or how misleading and fallacious their acts may be. The other composed of the quack, the charlatan, and the pretender, whose frauds and fallacies are studied and practiced upon the profession for notoriety or place, and upon the ever credulous public for purposes of gain; of the latter I do not propose to speak, feeling and rejoicing that they do not come within the sphere of my subject. To this class I may say, that I would relegate a large and numerous horde, which the non-professional public associate with our profession, but which all honorable physicians decline to recognize.

To this class belongs the pretentious advertising quack, in all of his multifarious forms and phases, whether he has entirely cut loose from honorable medicine, or as is too often the case, bears our colors, and sometimes flaunts our diplomas and mingles in our assemblies, that he may the more successfully practice his nefarious schemes.

To this class also belongs the exclusive pathy monger, who with his little bundle of infinitesimals and high potencies, and his constricted theories and narrow conceptions, weaves a woof of sophistry and fallacy about his chrysalis form, where without the faculty or merits of further evolution, in his narrow limits and with his meager stock and restricted ideas, he attracts the credulous and unwary, as do his co-workers in other departments of quackery and humbuggery.

He fails to find a congenial field for labor and practice in honorable medicine, whose empire is as broad as the universe, and whose explorers draw from the entire organic and inorganic kingdoms their treasures, and extract from them all that promises relief to suffering humanity, and which does not exact from its votaries any obedience to theory or dosage further than to employ the remedies with which nature has so bountifully surrounded us in an open, dignified and honorable manner. Rather, he fences himself apart with a ridiculous theory and an assumed importance, declaring that he is of a new school and improved system, all the while employing upon his misguided and deluded victims, the same remedies and dosage employed by the regular profession so far as his limited stock of medical knowledge will enable him.

I will with these allusions dismiss this class. They are with us and often humiliating amongst us, but not of us. Their sphere is with the ever credulous public, upon which they feed and fatten, and often flourish like a green bay tree.

I will, then, devote my attention to the profession, and by this term I mean to those who can honestly repeat the professional creed, and, who in reply to the oft asked question, *to what school of medicine do you belong*, can say I am a regular physician; I know no other school or pathy, nor do I recognize but this one.

There is, however, a rather numerous class to whom I wish to devote a word further on. These come and go with us, and are of us and amongst us, I will not continue the analogy and say, like Judas, betray us. But they sometimes do things which the better class of the profession could wish undone. They do sometimes stray almost too close to the polluting border line of quackery to preserve the spotless purity of the professional

ermine in which every physician should be clad. These are most frequently the undesigning fallacies of individuals, under the promptings of individual reasoning and personal interests.

In the very nature of things, fallacies such as I have designated, must necessarily creep into the profession. Fallacy and truth in most things, are to the physician mere relative terms without any definite meaning or standard of comparison. Did you ever reflect how very shadowy and unsubstantial a thing a medical truth so-called, appears when submitted to the tests which govern evidence in other departments of logic? The truths which our profession cherish, and upon which it mostly relies, are those which have descended to us from the individual and the aggregated observations of the past. We have neither absolute nor revealed truths to guide us, nor can we claim the enlightenment of intuitive truths, such as carry conviction with them, and have only to be stated to be accepted, such truths as "give sacredness to genius," and have been sung by poets and taught by moralists in all ages. But medical truths are not, and cannot be intuitive, notwithstanding the practices of some physicians, would indicate that they possess some intuitive process of arriving at facts not accessible to the ordinary painstaking, plodding brother.

Demonstrable truths are seldom available to us; these are the reasoning processes of the mathematician, and while in theory absolutely correct, in practice, subject to all the defects of human frailty.

Although the time seems propitious and the outlook hopeful, when with the aid of chemistry, the microscope and the spectroscope, and the demonstrations of the cultivation of disease producing germs, and with these cultures the reproduction of disease, the profession may in the near future hope to attain something of the facilities of actual demonstration for arriving at conclusions from medical investigations; still I may assume that for all purposes of medical reasoning, we have no well defined standard; we cannot reason like the Christian who goes to his bible as the acknowledged source of all truth; or like the lawyer who goes to his reports and decisions; or like the mathematician who reasons from his axioms and postulates; or like the chemist who armed

with his test tubes and reagents, forces nature to yield up her hidden truth.

But our profession, for all the heritage of knowledge which is the accumulation of bygone ages, must look alone to truths, which are the result of observation or to inductive truths. The search after which has furnished the life spirit of the so-called natural laws, the revelations of chemistry, geology, astronomy and medicine. These knowledge treasures are the off-spring of time and not of authority. Facts are their materials and co-ordinated facts their laws. Theories alone, which have ruled the world like succeeding shadows upon the mountain's side, or like styles in equipage and dress, have flourished and disappeared with the period which gave them birth, but facts recorded two centuries before the christian era, are to-day, often observed, as recorded by the Father of Medicine upon his tablets, while the theories of Galen, Paracelsus, von Helmont, Sylvius, and other bare theorists are less honored than the scattered dust of their originators.

Then, while the most precious medical truths which we have heretofore possessed, are the result of individual co-operative observations, it is evident that the medical theories and literature of the times are largely composed of individual observations, and with all of our defects for observing and recording correctly, it cannot be wondered that fallacies and misunderstandings have crept into the profession, even through the best guarded portals.

Without alluding to the fallacies of medical men who have lived and passed away with bygone ages, but who like a brave and noble army, with their faces ever turned toward the grand Orient of truth, have marched under the banner of honorable medicine, ever observing and evoking from nature and disease, what seemed to be of value to suffering humanity, and transmitting it to those who succeeded them; I desire not to go back over the records of past ages, and collect and chronicle their many fallacies and follies, for with all of these which unquestionably existed, much of their professional work stands forth to-day unquestioned, even in the light of modern science, and many of our most precious professional pearls are culled from the decaying shells of the past.

To find fallacies enough for review upon the present occasion, it is unnecessary to look further than the period in which we live, and within the memory of many of the Fellows present.

To the blind following of fashion, precept and theory, and the unquestioned acceptance of master minds, do we find the first cause of complaint. Many of us perhaps recollect and may have participated in the decline and latter days of the grandest fallacy which ever took hold upon the medical mind. I allude to the practice of blood letting in nearly all diseases, which prevailed as a universal practice for many ages, in all countries, where medicine was studied, and practiced as a science. We read in all the works on practice of the times, the advice to place the patient in a sitting posture and bleed to syncope, and as soon as recovered set up and repeat the bleeding, and this too in diseases where such practice as the present time would be considered little less than murderous. The evidence of inflammatory action was sought in the characteristic coagula of the blood, and venesection was the only remedy. Finally, the pendulum of professional fallacy swung back, the lancet was placed in its case, there to remain unmolested, and perhaps there exists in the profession of to-day as great a fallacy, though less fatal to the world, in withholding this remedy in the few cases, which now and then occur, in which it furnishes the only hope of relief.

The reckless and almost universal practice indulged in for ages, and emphasized with renewed life and vigor by Dr. Cook, of administering calomel in enormous and ptyalizing quantities, in its day was a fearful and fatal fallacy, which the non-professional saw and appreciated, before the trend of public sentiment had dawned upon the blind example following professional mind; and there was reared upon the ruins of this fallacy the abortive and half made up spawn of Thompsonism, afterwards rehashed into Eclecticism.

The blind and thoughtless practice of administering medicines in enormous and nauseating doses, in powders, lotions and boluses raised the gorges of the nauseated public until the wily Hahnemann took in the situation and precipitated his theory of high dilutions and infinitesimals upon a disgusted public. It was

pleasant to the palate, and as in all irregular practice much was claimed for the treatment, it spread rapidly and has taken a deep hold upon popular credulity, because the regular profession in its blindness and fallacy following of a custom, had failed to appreciate the fact that the human palate can not be ignored in the administration of medicines or aliment.

To correct the effect of these fallacies, a scarce less one exists to-day with many physicians. The administration of medicines in quantities wholly insufficient to accomplish any effect whatever; to give one drop of the wine of ipecac, or a half drop of the tinct. of aconite, or the one-fortieth of a grain of calomel, with the hope of accomplishing any result in an adult human being is a compromise with these humbugs, and possesses but little more merit and decidedly less originality than the practice of the homœopaths.

Another popular fallacy in the employment of calomel, will bear mention in this connection, the combining with each dose of a minute quantity of the bi-carb. of soda, from a half to two grains usually. I have never been able to learn the exact object sought to be accomplished by the combination, further than it is presumed to neutralize acid in the stomach. If for this purpose the quantity is nearly always too ridiculously small to accomplish the purpose, because if free acid exists in the organ as is usually the case, this small amount would not suffice to neutralize it. This is a companion piece to the practice which prevailed forty years ago, of prohibiting the use of cold water to a fever scorched patient while taking calomel, and to the no less barbarous one which still exists to some extent, of denying under similar circumstances the much craved vegetable acids for fear of salivation.

In connection with this valuable and universally employed agent calomel, I will mention another very wide spread fallacy emphasized by Dr. Hughes Bennett in his celebrated report as Chairman of the Edinburgh Committee, in which he claims after experimenting largely on dogs, that calomel administered to the human subject is in no sense a cholagogue, but on the contrary a liver sedative. That fallacy has prevailed and largely shaped

therapeutic theories from that day to this, and is entertained yet by some very good men, even in the face of the oft repeated declarations by the best investigators and the most learned men in therapy. That calomel is a purgative alone, in consequence of the production of intestinal peristalsis by the bile which the calomel stimulates hepatic cells to secrete. It would seem that the visual and sensorial perceptions of all who have taken this drug, whether of the profession or laity would have been impressed through eye or anus, of the utter lack of truthfulness of the doctrine, but still the fallacy lives.

Perhaps the most common fallacies which exist with the general practitioner of medicine are in the shape of hobbies and hobby riding. We see hobbies in diagnosis and in the comparative value and importance of means employed; in pathology and the comparative frequency of organs implicated in disease; in therapy and in the value of certain drugs to the exclusion of others.

I would emphasize the fact that fancy and fashion, often more than reason, rule the masses, in the theories and practice of medicine to a great extent, just as in dress, equipage and style, rule the same individuals in their relation to society; and this hobby worship often controls the individual and molds all of his conclusions and practices to fit some preconceived theory or condition. When brought in relation with the laws of nature and disease which are as immutable as nature itself, this method of arriving at conclusions must necessarily result in most glaring fallacies.

Nearly every man who has practiced medicine for any considerable length of time, can look back over his career and recollect many hobbies which he had cherished, perhaps for years, as almost divine truth, and which at last proved utterly worthless, and turned to ashes like fallacious, dead sea apples, and were finally abandoned as useless, perhaps harmful. Such a one can scarcely visit a cemetery where he has pursued his calling, without conjuring up in his imagination the grim spectre of one or more poor victims, sent before their time to the dread hereafter, who owed their untimely taking off to some fallacious hobby just then controlling the mind and practice of the medical attendant.

Hobbies and hobby riding are not peculiar however, to our profession. They are found in all the avenues and departments of life, and the tendency to indulgence in this fallacy, seems to constitute no inconsiderable element in the general make up of human nature. A little of it is not objectionable, it gives a kind of individuality to the man, but when a fellow's hobby takes up the whole path (as some one else has said), it is time for him to dismount, for if tested by the simple rule laid down in the beginning, and the entire profession should indulge in hobby riding, it would become a roaring, farcical fallacy.

Nearly every one lays particular stress upon some diagnostic process or means of interrogation. One will dwell particularly upon the color of the skin, condition of the eyes, bowels and kidneys. Another finds great significance in the appetite or thirst, and none fail to feel the pulse and look at the tongue, because a long training by the profession has taught the laity to expect this, and the man who fails to go through with the performance in orthodox style, is at once voted outside of the pale of experts and discharged. I know some gentlemen who are so accustomed to inspect the tongue, that all the children in families, where they practice, loll out their tongues as soon as the doctor appears. In point of fact, neither the pulse nor tongue is a very important diagnostic factor. They only furnish, not very important corroborative testimony in making up a verdict of diagnosis.

The pulse, when felt to determine the existence of fever, as is usually the case, is of but little significance, and the tongue in disease as well as in health, may be reliable, but most frequently is the most deceptive of all organs, and yet a large number of diagnoses are made wholly on the indications thought to be furnished by the tongue and pulse.

The clinical fever thermometer in its extreme use as employed by many, is as great a fallacy as the tongue. It can but indicate the standard of body temperature, and that is often but a small part of the make up of a diagnosis.

Many, perhaps nearly all physicians have hobbies in pathology; with one the stomach and digestive organs assume gigantic im-

portance in the economy, and he can trace all of the ills of his patients to errors in digestion and assimilation; another will blame the liver for all the ills of his patients, and as soon as he has inspected the skin, peeped into the eye, and had his patient "poke out his tongue" and has taken a wise look at it, and uttered the usual "umph humph," he is ready with a cholagogue for all diseases.

Another, with a slight inclination towards gynecology, has an iron clad rule never to consider the examination of a female with the least obscurity of symptoms complete, until the uterus and associated organs have been interrogated. The thousands of unnecessary examinations of nulliparous women, and even young girls, with the shame and evil results, may usually be laid at the door of men with this motto.

Another finds the grand center of all trouble in the kidneys, and he talks long and learnedly about Bright's disease. Surgical kidney, albumen and tube casts, and the urinary tests and the microscope, are brought into requisition by such a one, before announcing a probable, predetermined diagnosis.

Another locates all of his troublesome diseases in the nervous system, and neurasthenia is his hobby.

Another sees a diphtheria in every case of sore throat, and a typhoid in every simple continued fever. There is often, however, more method than madness in these fallacies. The condition of the blood can alone furnish the key to unlock the mysteries of diagnosis with another, while syphilis is ever before the diagnostic vision of many, and is trotted out to do penance for all manners of conflicting diseases.

Change of life, has been to doctors puzzled over female obscurities, as great a God-send as was that memorable "ox in the ditch" to christianity-professing sabbath-breakers.

There are others who do not care so much for diagnosis and pathology in their practice as they do for therapy. These gentlemen usually have from one to several remedies which they are ready to swear by, and which now and then, possibly their patients die by, and which to them is the *summum bonum* of all that is useful and essential in the treatment of disease. Why should such

gentlemen worry about the nature or name of diseases, when they possess particular remedies of such potency and versatility as to be applicable to all cases and conditions? The old compound of calomel and Dovers, has done service as a stereotyped prescription for many in the past. Quinine does duty as an omni-applicable agent for a larger class probably than any other one medicine, and owing to its general applicability in appropriate dosage to nearly every condition, it is unquestionably well suited to the purpose. If not decidedly useful, it is comparatively harmless. One has but to look through the prescription files of a city prescriptionist to appreciate the great similarity in the prescriptions of most practitioners. The impression made upon the mind of such an investigator, if he was not up to the hobby idea, would be that most physicians confined their practice exclusively to some two or three diseases. It is but justice to ourselves to say that we seldom pursue one hobby idea longer than a few months, before changing to a fresh steed, as the same prescription files will show.

A few select their favorite remedies with such consummate good judgment, and meet with such satisfactory results from their use, that they never have occasion to change; for instance, one distinguished gentleman will find a place for some of the ferruginous preparations in every case; another pins his faith to iodide of potassa; another to arsenic; another (many), to antipyrine; and others find it unnecessary to go beyond the salicylate of sodium in the great bulk of their practice.

Dr. Lister, by his then novel theory of antiseptic surgery, aroused a great upheaval of the sea of medical speculation, which has remained in perpetual commotion ever since. A new impulse in the form of the micro-bacterial theory of disease production, has added its mighty influence to the troubled waters, until the crested waves of speculation have almost engulfed us. The mighty sea of professional opinions has been stirred to its profoundest depths, and no one has felt sure of his footing upon old professional ground.

Those who at first took shelter upon the islands and accumulated debris of former times, have been submerged and borne

off seaward by the tide, and if not wholly flooded or picked up by the fleet of new ideas, cling to the wrecks of former theories. A few yet stand upon the continents of former opinion, and cry to the troubled waters to be quiet; but they still lash and fret, and will not down at their bidding.

The grandest medical problem, not only of the nineteenth century, but of all time is upon us in the investigation of the causative agencies of disease. While now and then we imagine that we see solid ground and a firm footing in the development of some master mind, and that we have attained a fixed and undisputed point upon which to plant our tripod and take our bearing, another wave of counter opinion will come and engulf us and all our hopes and theories. So I may say at present, the whole subject is under investigation. Many great minds are at work, evolving and collating all that seems useful in the great subject of mighty possibilities; while the million of lesser toilers, are trying to attract public attention to their little wavelets in obscure pools. None seem to have any sure and demonstrable ideas upon this subject, and I think we may safely conclude that the subjects of aseptic and antiseptic medication, and bacteriology, at the present writing are yet sub-judice, with a large balance in their favor.

The future medical historian will write up the present era, either as one productive of the grandest revelations in scientific and demonstrable medicine of all time, or else the doings and practices of the era, will furnish a very large chapter replete with the grandest, farcical fallacies, to be found in all the ages.

[TO BE CONCLUDED].

CHRONIC INDOLENT ULCERS OF THE LEG.

BY W. F. DRUMMOND, M. D., MAGNOLIA, MARENGO CO., ALA.

A few years ago I noticed several calls in the *Medical Brief*, for an approved treatment of chronic sore leg. In the *Dixie Doctor*, of last April, was an article on the above by Dr. Emerson, of Maine, and in the May number of the same was an article on the rapid cure of leg ulcers.

From the above cited calls and articles, I infer an awakened interest in such cases, perhaps, a non-plus^{ed} state in treatment, and as my experience has been in every case, satisfactory, the treatment unique and simple, requiring no bandaging by the surgeon, and no restriction on the patient, I am induced to submit the following report of cases, for the benefit of those who may have similar cases on hand, with the treatment of which they are dissatisfied, and who are desirous to adopt some other treatment that will give less trouble and better results.

Case No. 1.—S. M., white, a tall, frail looking, laboring man, a cotton screw-builder by trade, a victim of dyspepsia, about 40 years of age, was convalescing from an attack of malarial remittent fever, in which I had attended him and, during which I had often detected a peculiar disagreeable odor, in consequence of which, I had, several times, requested his wife to look closely after his bedding and linen. As I was about to leave at the close of my last visit, I gave her another trial in regard to the odor, when he replied, "Doctor, I am not a nasty man; see here is what you smell," thrusting a leg out from under the bed cover, he disclosed an old shin sore, of an extensive surface—an ugly looking customer—that he had carried for over fourteen years, for the healing of which every neighboring physician had tried his hand, the result of which had rendered him hopeless of ever being cured, and, as a final application, suggested by his last M. D., he had kept the sore dusted with the sifted powder of some special dry, rotten wood. After hearing his statement, I requested him to report at my office as soon as he was able to do so, and I could give him something that would cure it, which he did in the course of a few weeks, when I prescribed

R Diluted Nitric Acid.....℥viij.

Sig: Dose 30 drops, gradually increasing one drop to the dose every day, to be taken in a cold infusion of wild cherry bark. I have often given it in simple sweetened water, with the same effect. He was also directed to add a teaspoonful of the acid to a tumblerful of water, and apply to the sore two or three times a day; if it caused decided pain, he was to make further dilution, if it was not felt, he was to add more of the acid to bring it up

to a slight stinging point. After the application of the acid, the sore was to be covered with a strip of soft cloth, on which was spread resin cerate, carbolic or simple cerate; which was retained in its place by any device he might select, provided the limb was not constricted. The result was a perfect closure in a few weeks.

Case No. 2.—A. B., a stout negro-man, about 60 years of age, a farm laborer, came to consult me in regard to a shin sore that he had carried for upwards of seventeen years. No treatment had ever helped it, and it bothered him more as he grew older. *R* Dil. Nitric Acid with the same directions given to him as in Case No. 1, with the same result, a perfect cure in a few weeks.

Case No. 3.—W. D., white, of a scrofulous diathesis; general health passable. Came under my treatment for the same kind of sore, which he had carried for the past eight years; had had nothing done for it; was constantly on horseback, having often to take long rides, which had begun to aggravate the sore, and cause much pain. *R* Dil. Nitric Acid, with the same directions as in above cases, which resulted in a perfect cure in a few weeks, although he continued to ride as before.

Case No. 4.—T. I. F., white, about 25 years of age, farm laborer, stout, general health good. Came under treatment for the same kind of sore, to which he had applied bluestone, with salves, innumerable, none of which had helped it any way. He had carried the sore, about eight years, and it sometimes prevented him from doing his full day's work. *R* Dil. Nitric Acid, to be used the same as in the above cases; result a perfect cure in two months. The healing in this case was retarded by his constant hard labor, frequently digging wells, and his often neglect in taking the remedy for days at a time.

Case No. 5.—In connection with the above, I cannot refrain from reporting the following case, which, although different, is yet analogous to the above, and, may present some points of interest to the practical physician. W. C., white, 78 years of age, a farmer; has always been an active and hard laboring man; general health good, with the exception of a skin eruption which he called tetter, which he has carried from early manhood to this

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time. The eruption would at times involve the entire body, particularly bad about the feet and ankles, hands and wrists. It is what is classed as psoriasis. About six years ago he had an eruption of boils, which ran their course, with the exception of one, which occupied the centre of the sternum about two inches from its upper margin; this boil, as he termed it, did not run the course of the others, it was of a darker hue, did not suppurate, was tender and at times painful; in about two months its surface abraded and a scab formed, which peeled off, and was succeeded by another. Each time the sore enlarged its area, and became more and more painful, finally, it assumed the appearance of a wart with well defined seed roots, and would occasionally bleed and yield more or less pus, it was at times very painful, particularly as before a hemorrhage, when the pain would begin in each axilla, and shoot towards the sore; and was only relieved by a flow of blood with some pus, it would then get easy and remain so in a measure until the hemorrhagic time would recur. There were no sequelæ or definite periods governing the hemorrhagic flow. The above was his statement of the case. When he came under my treatment he had had no special treatment for it; believed it to be a cancer, had applied home-made salves, etc. He gave no history of syphilis or cancer. The sore occupied the above stated position, was nearly circular, about two inches in diameter, edges swollen and everted, looked seedy with every appearance of a wart; it had bled some and had been very painful. Considering the presence and the history of the tetter, I prescribed tablets of the sulphide of arsenic, which he took regularly without any benefit. I then put him on the Dil. Nitric Acid, to be taken and used as above stated, which in the course of two months resulted in a perfect cure. The nitric acid had no discernible effect whatever on the tetter, but the wart vanished under its use.

Other cases could be reported, but the above will be sufficient to illustrate the treatment. The rationale of the treatment I consider to be as follows: These sores are based on a depressed and debilitated state of the system, the whole tendency is towards molecular disintegration. The nitric acid enters

the blood, and is carried direct to the seat of the disease, and then enters the area of these molecular changes, and so impresses the terminal fibers of the nerves of the part, together with the molecular changes themselves as to generate alterative changes in the part, strengthening and vitalizing the natural disposition, that is inherent in all living tissues, to repair any breach of structure that may have happened.

The above may be all guess work, the elucidation may be illusory, its action may be beyond explanation, but, of this I am confident, that the above treatment will give a quicker and better result, and with less trouble to the surgeon, than any that is usually followed.

PULMONARY ACTINOMYCOSIS.

BY E. S. MCKEE, M. D., CINCINNATI, O.

Israel¹ in 1878, first described this affection in man, since which time, case after case has been reported. One of the most interesting of these is by Lindt,² where the patient died and a very careful post-mortem was made. Laker³ presented a case of primary actinomycosis of the lungs, at a meeting of the Society of Physicians of Syria. Patient, was admitted for a suppurative process in the upper sternal region. Numerous granules of actinomycotic fungus were found in the pus, and the affection was recognized as actinomycosis of the lungs. He complained only of intermittent pains of varying in intensity on the right side of the chest. The expectoration did not exceed thirty grammes in twenty-four hours. He was greatly emaciated. The abdominal walls were pale and yellowish in color; the chest shortened and higher on the right side than the left. This differed from other recorded cases, in which the affected side was markedly retracted. In the right intra-clavicular region, there was a dull tympanitic percussion note. At the inner side of the nipple, there was also an area the size of the palm of the hand over which was a dullness, bronchial breathing and increased vocal resonance. The perforation was about five centimeters below the nipple and dis-

charged a large quantity of pus with numerous actinomyces. Above this spot was a *bruit de pot fêlé*. From the clavicle downward was emphysema of the skin. The apex of the heart was in the fifth intercostal space, the sounds were normal. In the second intercostal space was a slight systolic and diastolic murmur; it was not impossible that the formation of an aneurism was in progress. The patient was very anemic, the hæmoglobin in the blood being reduced to twenty-five per cent. There was no albumen in the urine. The doctor demonstrated the presence of the granules in the sputum, and displayed the readiness with which a diagnosis between this disease and the chronic pneumonia process could be made, even without the aid of the microscope.

Sokaloff⁴ described a remarkably rare case of actinomycosis of the lungs, in a soldier aged 25, who was admitted in the sixth week of a severe typhoid fever; croupous pneumonia of the left lung with numerous pneumococci soon developed; actinomyces in large numbers were discovered. One week later a localized percussion was recognized in the lower lobe of the right lung, the patient died in a few days from prostration and cardiac failure. The necropsy revealed, besides typhoid lesions in the intestines and pneumonic infiltrations on the left side, an actinomycotic focus as large as an orange, situated in the posterior portion of the lower lobe of the right lung. The case presented an unique instance of simultaneous mixed infection, by the pathogenic microbes of actinomycosis, croupous pneumonia, and typhoid fever. The diagnosis of pulmonary actinomycosis was made during the patient's life, solely by means of the examination of the expectoration. This was the fourth instance of an *intra vitam* diagnosis of the disease. The sputum as well as the lung tissue contained only threads of the actinocladothrix, but no club shaped bodies. It had the characteristic appearance of red currant jelly and was very viscid. The cladothrix proved to stain well after Erlich's method, which up to date, had been regarded as the specific one for dyeing the tubercle bacillus and those of lepra only.

Rutimeyer⁵ reports the case of a 25 year old factory hand, who at first complained of ill defined lung trouble on the left side,

and was referred to the surgical clinic for an operation on a fluctuating swelling in the left thoracic wall. The incision permitted the escape of a large number of actinomycosis so that the diagnosis was immediately fixed; also a great number of hardened fungi were found in the sputum. The general health went down rapidly, despite repeated surgical interference, although the lung trouble did not seem to grow worse. The patient died under symptoms of dropsy and heart weakness. Post-mortem revealed a keg formed section of the lung affected, which extended from the hilus of the left lung toward the middle of the anterior and lateral lung surface. There was an extensive swelling of the pericardium and the pleura, as well as destruction of the soft parts of a portion of the thoracic wall; no farther metastasis. He showed macro and microscopic preparations and recommended creosote as a remedy.

1. Israel, Virchow's *Arch.* Bd., 74, 1878 and Bd. 79, 1879.
2. Lindt, *Med. Correspondence blatt fur Schwitzer Aertze*, May 30th, 1889.
3. Laker, *Wien. Med. Presse*, June 30, July 7 and 14, 1889; *Occidental Med. Times*, June, 1889, (Vienna letter).
4. Sokoloff, *Centralblatt fur Bakteriologie und Parasitenkunde*, March 29, 1889; Eissen, *Klin. Gazeta*, (Russian), No. 25, 1888, p. 497; *Vaënnö-Sanitarneö Dëo*, 1889, Nos. 1, 1, p. 9; *St. Louis Med. and Surg. Journal*, April, 1889.
5. Rutimeyer, *Berlin Klin. Wochenschrift*, June 21 and 28, 1789; *Corr. Blat. Schwitzer, Aertze*, April 15, 1889.

Selections.

MODERN SURGERY.—Would that I possessed the power of a Homer, Virgil, or Milton, that I might immortalize these men who have made surgery what it is in 1890; but, alas! I have neither the power or space in which to do justice to the many grand heroes of the present age, and must therefore content myself by merely mentioning the names of a few who have been the pioneers in the grandest work the world has ever known.

The names of Dupuytren, Roux, Lisfranc, Velpeau, and Nèlaton, of France; Abernethy, Cooper, Brodie, Fergusson, and Lawrence, of England; Colles and Hamilton, of Ireland; Bell, Syme, Liston and Simpson, of Scotland; Graefe and Rust, of Germany; Scarpa and Porta, of Italy; Physick, Mütter, Pancoast, S. D. and S. M. Gross, of Philadelphia; Wright, Post, Kissam, Rodgers, Watson, Stevens, Mott, Van Buren, Parker, Sands, Wood, Little, Carnochan, A. C. Post and Sims, of New York; Nathan Smith, of New Haven; the Warrens and Hayward, of Boston; N. R. Smith, of Baltimore; Warren Stone, of New Orleans; Dudley, of Lexington; Brainard, of Chicago; Eve, of Nashville; Hodgen, of St. Louis; and James Cabell, of Virginia, are now numbered with the noble dead, while there yet remain with us some of the grandest, noblest pioneers, and most distinguished surgeons the world has ever known. I can not, therefore, do justice to the surgical progress of this century without mentioning these names. Among this long list of distinguished names. I cannot refrain from mentioning some of our European *confrères*, although I shall enter more fully on the work done by Americans, since we all naturally feel an especial interest in our countrymen. Germany has produced during this century some of the most distinguished surgeons the world has ever known, and among those names already immortal are Virchow, who has given us the best work on *Cellular Pathology*; Billroth, the best on *Surgical Pathology*; and Esmarch, the best *Hand-book on Military Surgery*. However, the fame of Billroth and Esmarch does not by any means entirely rest on these valuable publications, since the boldness and originality of their surgical procedures have likewise electrified the world.

The commencement of this century found America without any really distinguished surgeon, without a surgical literature of her own, and without colleges in which to educate her own students. She was at this period almost entirely dependent on Great Britain for the education of her sons in medicine, and our medical literature was likewise principally obtained from the same source. It is likewise true that in no part of the civilized world had surgery reached a higher degree of perfection, but America

just emerged from a long revolutionary struggle and started forth among the independent nations—she was now compelled to provide for her own wants. This fact undoubtedly prompted her to put forth her best efforts. The trying ordeals through which the colonies had passed in their long and murderous wars with the Indians, followed by the revolutionary struggle of seven years war with England, had produced a bold and hardy race of pioneers, who were prepared to attempt anything which offered even the slightest chance of success. The women possessed fortitude and courage, and were prepared to suffer pain, if it had only an adequate reward. It is not therefore surprising that in the autumn of 1809 Mrs. Crawford, who was suffering from an ovarian tumor, approached the unpretentious house of Dr. Ephraim McDowell, at Danville, Ky., and there submitted to an ovariectomy—the first operation of this kind *ever performed*, but an operative procedure which has already been repeated many thousand times with the most happy results. Mrs. Crawford recovered and lived many years in the full enjoyment of health and with entire freedom from pain. The operation was subsequently repeated several times by Dr. McDowell, who, we are informed, saved the lives of eleven patients out of thirteen. Thus began an operation which has added thousands of years to the lives of civilized women, and saved them from untold misery. McDowell, however, did not escape the sad fate which awaits every bold innovator in science. His fate in this respect was no better than that of the immortal Jenner, who was assailed by his own professional brethren, the ministers of the gospel, and the public press. Poor McDowell carefully prepared a report of this operation for publication in a medical journal which was edited by a professional friend and professional brother, carried it to him with his own hands, and requested this *now unknown* distinguished functionary to publish the same. The manuscript was in due time returned to the immortal McDowell, to whom it was suggested in a very friendly way that he ought never again to attempt the performance of this barbarous operation, the which had not even been recommended by the most distinguished surgeons of the world. It was likewise added by this friend and

distinguished editor that the "publication of your report of this case would endanger the safety of my journal and be ridiculed by the entire profession." This rebuff probably deterred him for a time from making any further attempts at publication, since the earliest publication made by him on this subject was in 1817. The performance of this operation was at first ridiculed in England, but soon afterwards he was given full credit for the same. Thus time rights these grievous wrongs and genius receives its just reward.—*Extract from address of B. A. Watson, M. D., President Med. Society of New Jersey. Published in full in N. Y. Med. Journal, August 2, 1890.*

THE RELATION OF MASTICATION TO PHYSICAL DEVELOPMENT.—Everything which influences the health of the people is of interest to physicians, and no question more important than dietetics could engage the attention of such a representative body as the American Medical Association. No one could understand the powerful influence which improper food is capable of exerting upon physical structure and development so well as they, and this subject deserves the special study of American physicians who are desirous of seeing a healthy and vigorous race grow up in this Western Hemisphere. De Tocqueville said that the white race on this continent is doomed to extinction. If this ever comes true, it will be because of the long continued neglect of some of the simplest rules of physiology.

That there are at the present time a large number of adults with imperfect teeth is a well-known fact. Poor teeth means poor mastication, poor digestion, poor health and poor physical development. The early loss of teeth by the people of this country is explained by the unscientific habits of feeding generally practiced among young children. When the infant is brought up on pap and pre-digested foods the function of mastication is not required. As a result of want of use, the jaws imperfectly develop; the arch is narrow and the teeth are crowded and irregular. Nature does not reduce the number of teeth, but she attempts to force thirty-two teeth into jaws that have only room for twenty-four, and the quality of the teeth is not up to the

standard, so that they readily commence to decay. When the child has grown up, it is too late to prevent the mischief. The decay of teeth is more due to insufficient nourishment than to injury or decay of the enamel.

The rational means of preventing the state of affairs just referred to is to commence early, and give the child food that requires mastication. The result will be increased function of the gums, teeth and salivary glands, and of the masticatory muscles, and the full development of the lower part of the face, with a corresponding improvement in the appearance of the man. In the average family the questions of diet are relegated to the cook, whose duty seems to be to provide food which is so soft as not to require to be chewed, and is accompanied by large quantities of coffee, or tea, or ice water, which takes the place of the salivary secretions. The evil effects of this system of feeding can be seen on every hand. The remedy suggests itself.

Mastication is the most important step; by it the food is reduced to a pulp and is thoroughly incorporated with saliva. The act of chewing also stimulates the flow of the gastric juice, and is necessary to perfect stomach digestion. General health of the body intimately depends upon digestion and assimilation of sufficient food of proper character, but no matter how a man regulates his diet he cannot overcome the evils of his early training in this direction. Just here we are confronted with a danger which strikes at the very life-blood of the nation, and is already sapping its strength.

If the proper care be observed in rearing children and giving them sound wholesome food requiring the use of their masticatory muscles, there is no reason why a superior race of men might not be developed, just as we raise the fastest horses and the finest cattle in the world. The appeal is made to physicians especially, to see that the glorious birthright of the American citizen is not bartered away for a mess of pottage or other soft food.

By pursuing the plans adopted by the ancient Greeks, we might not only equal their achievements, but even surpass them in physical development and personal beauty.—*Dr. E. A. Wood, in Dietetic Gazette.*

A NEW INFALLIBLE SIGN OF PREGNANCY.—Compes, in *Berlin. Klin. Woch.*, '95, No. 38, says that Reizl has recently written calling attention anew to Hegar's very sure sign of pregnancy, namely, the very great pliability of the lower segment of the uterus, which stands out in bold contrast to the density and rigidity of the cervix. From his position in the Friburg Clinic and by means of a very large number of cases of pregnancy in the first month, he can confirm this statement. The author wishes to draw the attention of the profession to these facts, which have hitherto had but little consideration.

The index finger is introduced into the rectum, after which the thumb, being introduced into the vagina, rests upon the os, then moving it backward to reach the sac of the internal sphincter ani. Provided this does not succeed, one half pint of warm water can be injected into the rectum. Then with the free hand he presses inward just over the symphysis towards the rectum, so as to engage between the fingers the lower segment of the uterus in the neighborhood of the cervix; in this way he examines the middle and the sides and then all sections of the body of the uterus. This compressibility is found in all possible stages of pregnancy. Under other circumstances, pathological conditions, and peculiar phases of gestation it is never observed. They came to this conclusion, because the lower segment of the uterus is the thinnest part of the entire body of the uterus, because it is also during pregnancy becomes relaxed and succulent, and because the contents, on account of the greater elasticity likewise of the wall of the upper sections of the uterus, can become displaced by the light weight in it.

This proof is positive; where it is, present pregnancy is in the highest degree probable.—*Central für Gynäkol.*, Dec. 19, 1885.

COCA IN HOARSENESS OF PROFESSIONAL SINGERS.—The *Journal of the American Medical Association* of May 3, 1890, gives a valuable article, entitled "Hoarseness in Professional Singers, and its Treatment," by Charles E. Sajous, M. D., Lec-

turer on Laryngology and Rhinology, Jefferson Medical College. We extract the following (page 645) :

Of great assistance in the treatment of these cases is the use of coca wine when taken not only a half-hour before the performance, but at the end of each act, so as to obtain the benefit of "toning" action when the next act is about to begin. That the "toning" action is not due to the wine proper, as some believe, is demonstrated by the fact that sherry, the most alcoholic of all wines, does not at all give the singer the smoothness and ease of execution obtained from coca wine, while liquors, such as whisky or brandy, tend to increase hoarseness, if present, or to cause it if it is not. An interesting paper on this subject was recently read before the Société de Médecine Pratique by Dr. Sanders, of Paris, who thought he could ascribe to the use of cocaine, or coca, internally or by atomization, cases of aphonia occurring in his practice. That cocaine, used locally in any form, may produce aphonia, there is no doubt ; but that coca administered internally should, is disproved not only by clinical experience, but by our knowledge of the physiological properties of the drug. As demonstrated by Laffont, the action of coca upon the nervous system is one of stimulation, which exerts itself principally upon the constrictor fibres of the sympathetic. The "toning" action of the drug on the larynx is thus clearly explained by the intimate functional relation between the vagus and the formation of the voice, which depends, in reality, upon the action of the constrictor muscles. That paralysis may be due to overstimulation by coca is negatived by the vigorous condition of the natives of Peru, Bolivia, and Columbia, who are, on the contrary, noted for their staying powers, which they ascribe to their constant use of coca-leaves. The fact, however, that many of the coca wines on the market are but solutions of cocaine in either sherry or port wine renders it quite possible that anæsthesia of the posterior portion of the larynx might be caused by contact with the drug during the act of deglutition, and thereby interfere with functions of the vocal organ. I noticed this effect—a stiffness in the throat—while trying a number of brands to ascertain which would best serve my purpose. The preparation which I prescribe (Vin Mariani), made from the leaves, does not produce this effect, owing to the infinitesimal quantity of cocaine that it contains—

1-60 grains to the ounce—all anæsthetic action being furthermore antagonized by the tannic acid present not only in the leaves themselves, but in the exceptionally pure claret forming the excipient. A great advantage of “Vin Maraini” is that it exerts its tonic action without giving rise to constipation. It can for that reason be administered continuously, with much benefit at times, in cases in which muscular weakness causes tremulousness of the voice.—*Medical Bulletin.*

THE LOCAL TREATMENT OF DIPHTHERIA AND SCARLET-FEVER THROAT.—I have lately had much experience with the treatment of these affections, and have found that hydrogen peroxide, fifteen volumes strength, alone or combined with bichloride of mercury, gr. j to ʒ j, gives no better satisfaction than any other kind of remedy. Hydrogen peroxide is a thorough antiseptic, besides acting mechanically in getting rid of the membrane; it does the latter in the later or more dangerous stage, for it is at this time that septic infection is more liable to occur. When the membrane begins to slough, the peroxide will, when applied with a mop or in spray or as a gargle, get behind it, and by its action on the pus, free oxygen and carbonic acid gas, thus displacing it; the membrane appears under its action to lose all its toughness and crumble. If used in the nose—and it is here where we get wonderful effects—the peroxide had better be made of about ten volumes strength, and if the bichloride is combined with it, make it only gr. ½ to ʒ j. or in very young children still weaker. Before closing, I must add that but a small quantity of the medicine should be bought at a time, as it degenerates rapidly unless kept on ice in a dark place, and not agitated. The hydrogen peroxide losing strength so rapidly makes it very difficult to get it pure, so any one who should be disappointed in its action should not give up the use of it until he has surely tried the pure article. It will not, of course, cure all cases. Another point in its favor is, that when used in the throat it causes no pain. The action of the hydrogen peroxide, its thorough antiseptis, and the beautiful, mechanical action in forcing pus from cavities, is well known. It should never be used in a cavity unless there is free

vent, and especially when this cavity is about the neck; as such a volume of gas is liberated. Such an accident as I came very near having is quite possible. An abscess of the parotidgland following scarlet fever had been opened by a small incision. I thought I would wash it out with a little hydrogen peroxide, which I proceeded to do. As a result, I had a tremendously distended sac, the child blue in the face, and nearly suffocated. A large, free incision set matters right in a moment. As an application, and, when the patient is old enough, as a gargle, pure or half and half with listerine, it is the best application in scarlet fever and follicular amygdalitis I know of.—*Prof. W. Cheatham. M. D., of Louisville, Ky. in N. Y. Medical Journal.*

THE TREATMENT OF CYSTITIS IN WOMEN.—Dr. T. M. Madden presented the following note at the recent International Medical Congress:

Of all the diseases which come before us in gynæcological practice there is none more frequently met with, more distressing in its effects, or more intractable to the means generally relied on for its relief than cystitis in women. I therefore desire to bring under the notice of the International Medical Congress a method of treatment which I have found, by clinical experience, to be generally successful in the rapid curative treatment of this condition. The measures most commonly employed in such cases are merely palliative, and may relieve, but *per se* can never cure, well-established cystitis in women. Nor am I aware of any method by which that can be accomplished save by giving the bladder absolute physiological rest. For this purpose Dr. Emmet's operation—*i. e.*, the establishment of an artificial vesicovaginal fistula—may be successfully employed in some instances, but the practical objections to it are so great and obvious that for several years past I have abandoned this procedure in favor of another which I have found more generally effectual and quite free from the disadvantages of the operation referred to. The plan which I have now employed in a very large number of cases of cystitis in the gynæcological wards of the Mater Misericordiæ Hospital, Dublin, consists firstly in the full dilatation of

the urethral canal, with the instrument exhibited so as to paralyze the contractility of the sphincter vesicæ, and thus produce a temporary incontinence of urine; and, secondly, in the direct application through the same instrument of glycerin of carbolic acid to the diseased endovesical mucous membrane. I may add that any pain thus caused may be prevented by the previous topical application of a solution of cocaine, and that the procedure recommended seldom requires to be repeated more than once or twice at intervals of a week or ten days; and combined with the internal use of boric acid, rarely fails to effect a rapid cure in any ordinary case of cystitis.—*N. Y. Medical Journal.*

FRACTURED THIGH; EASY METHOD OF TREATMENT WITHOUT LONG SPLINT OR PULLEY.—In a paper read before the Tennessee State Medical Society Dr. J. W. Davis, of Smyrna, gave a detailed account of the method of treatment as practiced by him, and some three of his neighboring physicians. Place the patient on a bed, with a folded quilt under him; let the fractured thigh be semiflexed on the body, and the leg on the thigh; prepare an eight-tailed bandage and three pasteboard splints the length of the well thigh, softened a little with water; put the bandage under the thigh, with the tails or strips well and smoothly laid out; take hold of the knee, with an assistant to hold the hips, and make gentle traction, with the thigh and leg both half flexed, until the bone is well adjusted; then bring the thigh down in the bandage, with the outer side resting on the bed. Now, with the splints placed on the thigh next to the skin, the bandage is put on, by placing alternate layers or strips well over each other; fasten the bandage well, and put a soft small pillow under the knee. The patient can now rest easily on his side, with the well leg thrown over in front of the fractured one, or he can turn on his back, always keeping the fractured thigh on its outside, half flexed on the body, and the leg on the thigh; this will keep the shaft of the fractured bone in a line with its natural position. The dressing must be tightened up once a week. Always, when doing this, the knee must be firmly grasped, and gentle traction made, to bring the thigh bone out to its full

length. The muscles soon cease to contract, and, with care, you will rarely ever have a shortening of the bone. The blood-vessels lie so deep under the muscles that there is no danger of strangulation or congestion. The calls of nature can be attended to without trouble with the patient on his side, thighs flexed, etc. — *Virginia Med. Monthly*, May, 1890.

VEGETABLE ALTERATIVES.—Mercury and iodide of potash, separately or combined, has been the sum total of treatment, it may be said, in serious blood disorders as far back as our knowledge extends, and the patient was fortunate indeed, if, in being cured of his original disease, he escaped the constitutional effects of mercurials and iodides. That a purely vegetable medicine should be discovered, which in all useful qualities supplants mercury and iodides in these cases, and at the same time is so devoid of injurious effects that it may be taken in any quantity and for any length of time without harm, is certainly of great importance.

The experience of the past six years establishes beyond a doubt that *Succus Alterans* (McDade) is such a discovery, and, although Dr. J. Marion Sims had good grounds upon which to base his statement made in the *British Medical Journal*, in 1882 still he "built better than he knew," and it is doubtful if the great surgeon, in teaching the professional world his wonderful operations, ever performed a greater service than in bringing this remedy to the knowledge of his professional brethren. The good effects of *Succus Alterans* (McDade) in all diseases of the blood, whether due to some deleterious influence introduced from without, or generated within, are unmistakable, while it seems no less useful in impoverished conditions of the blood and diseases arising therefrom.

The highest authorities unite in support of these views, and confirmatory reports are daily passing into medical history.—*Mass. Med. Journal*.

LABYRINTHINE DEAFNESS.—M. G. P. Field, M. R. C. S., Aural Surgeon to St. Mary's Hospital, communicates to the

British Medical Journal a paper on the treatment of this form of deafness with hypodermic injections of pilocarpine. The results (told in most case in the patient's own words) are of a remarkable character. Persons who have been deaf for long periods, twenty years and even more, and had to rely upon ear trumpets for anything they did hear, gradually, under the influence of the pilocarpine, recovered their hearing, and that in so marked a manner as to cause comment by those who were unaware of their being treated. Mr. Field hesitates to explain how the pilocarpine acts, but there seems to be little doubt of the correctness of his suggestion that it stimulates secretion by the membrane, and maintains this so well as to help the absorption of any solid waxy matter which may be lodging in the ear cavity.—*Scientific American*.

PINUS CANADENSIS.—R. J. Mitchell, M. D., Thomasville, Ga., says: I have given S. H. Kennedy's Extract of Pinus Canadensis an extended trial. I am satisfied that it is a greater medicine than it is represented to be. In gonorrhea, leucorrhea and gleet, it acts like magic.

R S. H. Kennedy's Extract Pinus Canadensis
 (White) 2 ounces.
 Glycerine..... ½ ounce.
 Aquæ..... 6 ounces.

M Sig.—Inject three times a day after urinating.

I also used the Dark in chronic dysentery with pretty good results. The case of leucorrhea was of eight months' standing. I hope and predict that in the near future every physician will carry a bottle of S. H. Kennedy's Extract of Pinus Canadensis in his saddle-bags.

RHUBARB AS A CAUSE OF HÆMATURIA.—It is well-known that the ingestion of rhubarb, celery, and sundry other edible vegetables conduces to the elimination of oxalates in the urine, but the fact has not had any importance other than a physiological curiosity. It is, however, possible that the passage along the genito-urinary canal of these prickly crystals may in certain

persons, determine serious irritation, even running on to hæmaturia. Such, at least, is the conclusion of a correspondent who remarked on three occasions that more or less violent attacks of hæmaturia followed a meal comprising stewed rhubarb, in his case. The family was a gouty one, and this may account for the abnormal irritability of the kidneys, for hæmaturia is, fortunately, not a usual or even a common sequel to a feast of blood.—*Med. Gazette.*

HOW TO BOIL AN EGG.—I believe that ninety per cent. of the eggs are spoiled by the cooking. A physician orders a soft-boiled egg for his patient; the cook places in the boiling water the egg, and allows it to *boil* for three minutes, takes it out, and thinks she has a soft-boiled egg; but she hasn't. She has an egg cooked hard on the outside and still raw in the middle. Now, if she had first boiled the water, then removed the kettle and stood it on a piece of old woolen cloth, so that the heat would not escape too rapidly, then placed the egg in the water, and allowed it to remain about six minutes, she would have an egg evenly and softly cooked throughout, and a very elegant one at that.—*Medical World.*

FOR PRURITUS ANYWHERE, Campho-Phenique applied locally is good, but, Dr. Joseph M. Mathews, of Louisville, says: For that soul-harrowing itching of the anus which sometimes accompanies piles, campho-phenique is efficient, magical.—*Med. Mirror.*

"OH, mommer, mommer!" yelled a little darkey, as he saw the militia on the way to camp to-day; "what's them sojers?" "Sojers, chile?" exclaimed the mother; "what you talkin' 'bout? Dem ain't sojers; dem's de District malaria."—*Washington Star.*

SANDER & SONS' Eucalypti Extract (Eucalyptol).—Apply to Dr. Sander, Dillon, Iowa, for gratis supplied samples of Eucalyptol and reports on cures effected at the clinics of the Universities of Bonn and Greifswald.

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R Caffein 1 grain, Bromide Potash 20 grains in each heaping teaspoonful.

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Physicians desiring the Potash Salt can obtain the same by ordering or prescribing Bromo-Potash (WARNER & Co.) the composition of which is: Brom. Potash 20 grs., Caffein 1 gr. in each heaping teaspoonful.

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A VALUABLE AID TO DIGESTION.

PIL: DIGESTIVA.

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R	Pepsin Conc't,	1 gr.	Gingerine,	$\frac{1}{4}$ gr.
	Pv. Nuc. Vom.	$\frac{1}{4}$ gr.	Sulphur,	$\frac{1}{4}$ gr.
	In each Pill.			

This combination is very useful in relieving various forms of Dyspepsia and Indigestion, and will afford permanent benefit in cases of enfeebled digestion where the gastric juices are not properly secreted.

As a corrective of nausea or lack of appetite in the morning, induced by over indulgence in food or stimulants during the night, these pills are unsurpassed; they should be taken in doses of two pills before retiring or in the morning at least one hour before eating; the first mentioned time is the most desirable as the effects are more decided, owing to the longer period for action and the natural rest is more fully experienced through their mild but effective influence.

As a dinner pill Pill: Digestiva is unequalled, and may be taken in doses of a single pill either before or after eating.

The many flattering testimonials, which have been received from the Medical Profession, respecting the efficacy of these pills and their very extensive use is ample evidence of their superior properties in cases where such a medicine is indicated and warrants us in offering them with the full assurance that there need be no fear of disappointment in results.

Pil: Quininæ et Ferri et Zinci Valerianas.

(TRI-VALERIANATES.)

R	Quininæ Valer.	Zinci Valer $\frac{1}{2}$ gr. i.
	Ferri Valer.	M Ft. Pil. No. 1.

DOSE.—One Pill three times a day.

Recommended for the relief of Melancholia, Incipient Insanity, and as being particularly adapted for the cure of the worry of nervous females.

This combination is very highly spoken of by Dr. De Foe, in a communication to the Medical Press, as being a remedy of undoubted value in the maladies quoted.

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Reviews and Book Notices

ANNUAL OF THE UNIVERSAL MEDICAL SCIENCES, a yearly report of the progress of general sanitary sciences throughout the world. Edited by Charles F. Sajous, M. D. 5 vols. F. A. Davis, Publisher, Philadelphia, Pa., 1890.

The difficulty in speaking of this work is to rightly choose and meetly temper the words of praise. The work is of such immense magnitude, and so accurately and perfectly complete in contents and detail, that the editing appears as the work of genius. Dr. Sajous, assisted by seventy associate editors, the authors of the essays making up the departments into which the volumes are systematically divided, and two-hundred corresponding editors, collaborators, and correspondents, from every part of the world, has compiled an exact record of the progress during the past year in every branch of medicine, surgery and therapy. A convenient system of reference is applied throughout the work, showing the origin from which the facts so carefully and practically compiled and condensed are drawn. The reference list includes 850 journals and 250 books, monographs, theses, transactions, etc., a stupendous lot of publications to examine and select from, the actual new facts, the progress recorded; the mention of this list alone best indicates the magnitude of the matter presented.

FAMILIAR FORMS OF NERVOUS DISEASE by M. ALLEN STARR, M. D., Ph. D., Professor of Diseases of the Mind and Nervous System, College of Physicians and Surgeons, New York, With Illustrations, grams and Charts, 8 vo., cloth, pp. 339. Wm. Wood & Co., Publishers, 56 and 58 LaFayette Place, New York, 1890.

Advances in knowledge in the department of neurology have been of late more rapid than in any other branch medicine. The result has been to render diagnosis in many affections,

previously obscure, both more precise and less difficult; and to open to successful surgical treatment many diseases formerly considered fatal. It is the object of this volume to make available to the general practitioner some of the results of later investigations which have a direct and practical bearing upon the commoner forms of nervous disease. The facts which have been chiefly emphasized are those which enable one to make an accurate diagnosis of the nature and of the location of lesions in the central nervous system; for it is evident that such a diagnosis is the essential preliminary both to medical and to surgical treatment.

This work is not a treatise upon nervous diseases. It is a series of clinical studies of the more familiar types.

The cases here recorded have been carefully chosen from a large number because they present typical features and indicate the possibilities of surgical as well as medical treatment. The data have been selected exclusively from American Sources, and we have here a work that cannot be other than a source of pride to every American physician and surgeon.

RAILWAY SURGERY. A Practical Work on the Special Department of Railway Surgery: for Railway Surgeons, and Practitioners in the General Practice of Surgery. By C. B. STEMEN, A. M., M. D., LL. D., Professor of Surgery in the Fort Wayne Medical College; Surgeon to the St. Joseph Hospital; Chief Surgeon P., Ft. W., & C. R. R.; Local Surgeon of Wabash R. R., etc. 8 vo., cloth, pp. 315., with numerous illustrations. J. H. Chambers & Co., 914 Locust St., St. Louis, Mo., Publishers, 1890. Price \$3.00.

A most excellent volume—yes, a book devoted to great interest. While we have each year productions and reproductions from the great surgeons of the world, it was left to Dr. Stemen to strike out on a new line and give us a volume devoted to the accidents and injuries to which all are liable in this travelling country. Railroad injuries are peculiar; the intense amount of shock, the crushing of bones, the laceration of soft parts, the exhilarations of a pleasant trip brought suddenly to a painful conclusion—unexpected and abrupt, the faces of strangers in whose

hands we may fall, in lieu of wife, mother, father, brother or sister; there was certainly here an open field, which has been well cultivated by the father of the National Association of Railway Surgeons.

There is not a man engaged in the practice of medicine and surgery, living in sound of the clang, clang, of the engineer's bell, or his most ear piecing whistle's shriek, that could make a better investment of his hard earned and more hardly collected dollars than by purchasing this book. It is a good book—a valuable work, a most interesting volume.

ESSENTIALS OF ANATOMY AND MANUAL OF PRACTICAL DISSECTIONS, together with the Anatomy of the Viscera, prepared especially for Students of Medicine, by CHAS. B. NANCREDE M. D., Professor of Surgery and Clinical Surgery in the University of Michigan, Ann Arbor; Corresponding Member of Royal Academy of Rome; late Surgeon to Jefferson Medical College Hospital; etc. 3rd Edition, Revised and enlarged. Based upon the Author's Dissections and verified by reference to Gray's Anatomy. 30 magnificent colored lithographic plates, in colors; and 180 wood cut illustrations. 8 vo. cloth, pp. 338. Price \$2.00, W. B. Saunders, 913 Walnut St., Philadelphia, Publishers. 1890.

No pains or expense have been spared to make this work the most exhaustive and complete, yet concise Students Manual of Anatomy and Dissection ever published, either in this country or Europe.

The illustrations are marvels of beauty and clearness of elucidation. The beautiful colored plates cannot but materially aid the student in dissecting the muscles, arteries, veins and nerves, and the general practitioner will find them a most ready aid in reference. For this edition the wood cuts have all been drawn and engraved, to which is added an appendix containing sixty illustrations representing the entire Human Skeleton, the whole based on the 11th edition of Gray's Anatomy.

It is indeed a handsome and valuable addition to the medical literature of 1890.

While this book is not intended to replace the larger anatomical works, sufficient descriptive matter has been introduced to

enable the student to refresh his memory of the more numerous facts learnt in the lecture and dissecting room, or from his "Gray" or other text-book, differing in this respect from most of the works of its class, which are little more than a list of names, without any distinctive facts connected with them to aid the student in the difficult task of acquiring a knowledge of a branch of medical study almost solely dependent upon the unassisted powers of the memory.

It is truly a "*Vade Mecum*"—a "*multum in parvo*."

ESSENTIALS OF THE REFRACTION AND DISEASES OF THE EYE. Illustrated. By Edward Jackson, A. M., M. D., Professor of Diseases of the Eye in the Philadelphia Polyclinic and College for Graduates in Medicine; Member of the American Ophthalmological Society; Fellow of the College of Physicians of Philadelphia; Fellow of the American Academy of Medicine, etc., etc. And Essentials of Diseases of the Nose and Throat. Illustrated. By E. Baldwin Gleason, M. D., Assistant in the Nose and Throat Dispensary of the Hospital of the University of Pennsylvania; Assistant in the Nose and Throat Department of the Union Dispensary; Member of the German Medical Society, Philadelphia, Polyclinic Medical Society, etc., etc.

No. 14 of Saunder's Question Compend is a most excellent follower of its valuable predecessors, notices of which, and all favorable, have appeared in preceding issues of this Journal. This series of Student's Manuals are concise, yet, with their brevity, it is astonishing that they contain so much valuable information.

TRANSACTIONS OF THE AMERICAN PEDIATRIC SOCIETY. FIRST SESSION; together with the proceedings of the meeting for organization. Edited by WM. PERRY WATSON, A. M., M. D., Recorder, Vol. 1, 8 vo., cloth, pp. 315. Printed by J. B. Lippincott Co., 1890.

Medical organizations in America are certainly reaching their zenith, when a young society, for the benefit of the youngest of our populace can get out so handsome and creditable a volume of their initial work. Yet when one can see in its list of officers, the names of

Latimer, of Maryland, Keating of Pennsylvania, Love of Missouri, and such like in its Board of Council, Busey of District of Columbia, and others, and as its Editor and Recorder the name of Wm. Perry Watson, of New Jersey, nothing but excellence should be expected, and confidently.

Regretting want of space for a full report of this valuable volume of the transactions of a live organization, we can but mention that after the address of its President A. Jacobi, M. D., were papers from such men as F. Huber, J. O., Dwyer, Dillon Brown, C. Warrington Earle, A. Caille, A. V. Meigs, J. Lewis Smith, J. Henry Fruitnight, H. Koplik, W. P. Northrup, M. P. Hatfield, H. N. Vineberg, L. Emmet Holt, A. D. Blackader, T. L. Latimer, W. D. Booker, A. Seibert, Jno A. Jeffries and others, together with the discussions elicited by the very able papers of these gentlemen, who with their associates are recognized as authorities in pediatric science.

DISEASES OF THE RECTUM AND ANUS, their pathology, diagnosis and treatment, by Chas. B. Kelsey, A. B., M. D., Professor of Diseases of the Rectum at the N. Y. Post-graduate Medical School and Hospital; late professor of Diseases of the Rectum, University of Vermont. Third edition, re-written and enlarged, with two chromo-lithographs and 168 illustrations. 8 vo. cloth, pp. 483. Wm. Wood & Co., Publishers, 56 and 58, LaFayette Place, New York, 1890.

Dr. Kelsey has justly won and earned a grand reputation in "fundamental medicine and surgery." He is a recognized authority in all the morbid conditions to which our outlet is subject. The handsomely printed and beautifully bound volume before me, needs no commendation at my hands, nor do I think I could give my readers a better idea of this excellent work than by quoting in full this most excellent author's very modest preface.

"The great advances which have been made during the past few years in the surgery of the rectum and intestinal surgery generally, have necessitated many changes in this, the third edition of this book. The chapters on the treatment of stricture both be-

nign and malignant, on the formation and closure of artificial anus, have therefore been entirely re-written, and much new matter has been added.

The attempt has also been made by the addition of numerous illustrations, and by clear and definite descriptions, to supply the general practitioner with a safe guide for the performance of all the operations called for in the diseases of the rectum."

WOOD'S MEDICAL AND SURGICAL MONOGRAPHS Consisting of Original Treatises and Reproductions, in English, of Books and Monographs selected from the latest literature of foreign countries, with all illustrations, etc. Published monthly, at \$10.00 per annum, or single copies \$1.00 by Wm. Wood & Co., 56 and 58 Lafayette Place, New York, 1890.

Volume 6, No. 3, for the month of June contains the following valuable articles: Bronchial Asthma; its causes, pathology and treatment, by Jno. C. Thorowgood, M. D., F. R. C. P.]

Surgical treatment of Diseases of the Brain by Ernst Von Bergmann, of Berlin.

It also contains a full index for the volume.

In the July number, it being number 1 of Volume Seven, we have Stricture of the Rectum, by Chas. B. Kelsey M. D. Influence of Heredity on Alcoholism, by Dr. Paul Sollier of Paris, Rabies by Louis Pasteur of Paris. Colotomy by Thos. Bryant, F. R. C. S., Massage of the Abdomen, by Dr. Reuben Hirschberg.

Truly a valuable amount of literature for so small an amount of money.

NEURALGIA, by E. P. Hurd, No. 1, (Physician's Leisure Library Series), 12 mo. paper. Geo. S. Davis, publisher, Detroit, Mich., 1890. Price, 25 cents, p.p. 153.

The progressive publisher of the "Leisure Library Series," has enabled Dr. Hurd to present some very excellent and practical ideas in regard to one of the "opprobria" of the healing art. Neuralgia has many times proven a "bete noir" to the worn and wearied doctor. Well, here he can invest the fourth part of a dollar to his benefit.

RHEUMATISM AND GOUT, by F. Leroy Satterlee, M. D., (Physician's Leisure Library Series.) Geo. S. Davis, Detroit, Mich., Publisher, 12 mo., paper. Price, 25 cents, p. p. 84.

A very neat little brochure, as are all of "The Leisure Library Series." If you want a clean cut statement from a reliable authority on Rheumatism and Gout, you cannot do better than by investing a "shekel" here.

Editorial.

STATE REGULATION OF MEDICINE.

Although this subject has been settled, temporarily at least in this state, yet having taken an active part in its opposition, following out the clear and logical reasoning of my old teacher—the talented "Sage of Swallow Barn," the following views editorially enunciated in *The Popular Science News of Boston*, with its extract from the editorial in that standard periodical, *The Popular Science Monthly*, are more than interesting.

"Until recently the *Popular Science News* has stood almost alone in opposing the so-called "regulation" of medical practice by the State—or, in other words, by the professional politicians. We have always held that governmental interference in any business not distinctly criminal or immoral is a violation of personal liberty and inherent natural rights. While quackery is bad enough, the suppression of individuality is a great deal worse, and the only just and rational system of government is that which upholds the right of every individual to act exactly as he pleases, only preventing him from infringing upon the similar right of his fellow beings to act as *they* please.

It is with peculiar pleasure, therefore, that we copy the extract given below from a recent editorial in the *Popular Science Monthly*, as showing that similar ideas are now being supported by journals of the highest standing and authority, and we notice also that it has been copied into several other high class periodicals, apparently with approval of the views therein put forth.

"Justice consists in defending individual citizens against the violence or fraud which these fellows might otherwise exercise against

them, while leaving to each as far as possible the conditions of existence natural to him as an inhabitant of the planet. . . . Established for quite a different purpose, the government has no competence to industrial matters, and can only act therein upon the advice of others. *This advice is nearly always interested and unjust.*

The above remarks apply to tariff legislation, but individual liberty is abridged in many other ways that seem essentially wrong. That the members of a particular profession should have laws passed in their special interest, and should be empowered to decide who may or who may not enter into competition with them, is, we think, a violation at once of justice and of liberty. It would scarcely be too much to say that the most offensive forms of trade-unionism are found in connection with the so-called learned professions. Time was, when it was supposed that the state had to look after the spiritual health of individuals; and for that purpose to prescribe their theological beliefs and religious observances. That belief has for the most part been exploded in the modern world, but its place has been taken by the notion that the state is responsible for the intellectual health of its members; and in lieu of the state church we have state schools. As regards the physical health of the community, the general method is to legalize one or two—possibly quite conflicting—schools of medicine, and to empower them to rule out, and if necessary to prosecute and punish all others. Nobody, broadly speaking, seems to believe that, in the absence of all legislation of this character, people could in any adequate manner preserve their health or protect themselves against gross imposture. *We* believe it—believe it most heartily; and we believe that the science of medicine would advance far more rapidly, and that, on the whole, the public health would be far better, if every man were left perfectly free to employ any one he chose to attend him in sickness. At present every licensed practitioner feels himself authorized to call every unlicensed practitioner a quack. We should prefer a system under which, to a quickened public intelligence in questions of health and disease, the quack should stand revealed by his quackery. How much of real quackery is now concealed by the license to practice it might distress a confiding public to know.

Our voice may be as that of one crying in the wilderness, but we cry with conviction when we call for more individual liberty, with its correlative individual responsibility. There is something wrong, something viscous, in the application of compulsion where freedom of

Gastric Derangements.

Horsford's Acid Phosphate.

Unlike all other forms of Phosphorus in combination, such as dilute phosphoric acid, glacial phosphoric acid, neutral phosphate of lime, hypophosphites, etc., the phosphates in this product are in solution, and readily assimilative by the system, and it not only causes no trouble with the digestive organs, but promotes in a marked degree their healthful action.

In certain forms of dyspepsia it acts as a specific.

Dr. H. R. MERVILLE, Milwaukee, Wis., says: "I regard it as valuable in the treatment of gastric derangements affecting digestion."

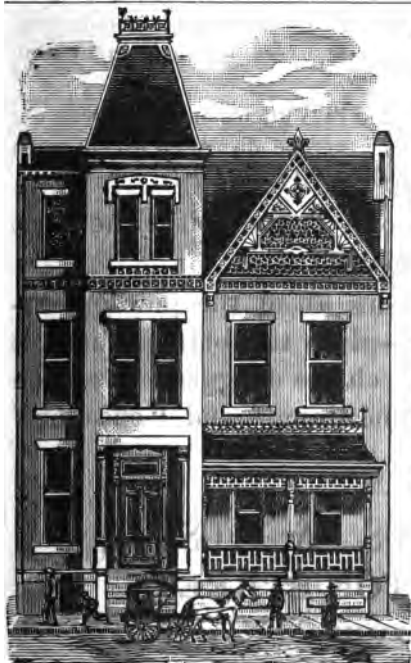
Send for descriptive circular. Physicians who wish to test it will be furnished a bottle on application, without expense, except express charges.

Prepared under the direction of Prof. E. N. HORSFORD, by the

RUMFORD CHEMICAL WORKS, Providence, R. I.

Beware of Substitutes and Imitations.

CAUTION.—Be sure the word "Horsford's" is *printed* on the label. All others are spurious. Never sold in bulk.



"BELAIR,"

—A—
Private Infirmary

—FOR—
DISEASES PECULIAR TO WOMEN

Belmont Avenue and Hayes Street,

Nashville, - Tenn.

Was opened for the reception of patients on January 1, 1890.

This institution is located in one of the most desirable residence portions of the City of Nashville and without any objectionable surroundings. The appointments are first-class, and nursing by trained and thoroughly qualified attendants.

Physicians wishing to send patients to such an institution, whether for medical or surgical treatment, will please address either

J. R. Buist, M. D.,

151 N. Spruce Street,

or Richard Douglas, M. D.,

206 N. Summer Street,

Nashville, Tenn.

THE PITH OF THE PEPSIN AND THE PEPTONES.

"If, now, a peptone is present, you have not a substance capable of doing this work, but, on the contrary, you have the product of such work already performed, and to just the extent to which such peptones are present your product is ineffective. * * * *

"Finally, I may say that it is a mistake to believe that a pepsin does any better work because of its being freely soluble."—*DR. RUSBY.*

"It has been observed during this investigation, that deliquescent pure pepsins were no better than saccharated in their average strength."—*DR. ECCLES.*

"There is a class of preparations on the market which claim on their label to be pure pepsin, none of which that I have met with are pepsin at all. * * * *

"These preparations were in the form of scales originally, and changed to this pasty mass on standing in a cool, dry place in my store in uncorked bottles.

"They are soluble in water, and by Vittich's and other tests are without doubt peptones, and should never be dispensed except when demanded by the physician."—*PROF. BARTLETT.*

Fairchild's Pepsin is not a Peptone, it is the most active; it is absolutely permanent.

If your patient complains about the powders becoming sticky, investigate—place the blame where it belongs—on the peptone which the druggists has been told is "just as good," "same thing," and "cheaper" than Fairchild's.

FAIRCHILD BROS. & FOSTER,
82 & 84 FULTON STREET,
NEW YORK.

choice is indicated by all the natural conditions of the case. Force should be reserved for cases in which force is required, where nothing else will serve the purpose, and where the purpose is vital to the life of the society. In other cases the application of force is wrong. The issue of "Man *vs.* the State is a moral issue; and the more the question is looked at in that light, the more irrelevant, or at least unnecessary, other lines of argument will appear."

Our excellent Boston contemporary concludes its editorial remark with the following terse paragraph:

"With the advance of civilization we may expect to see such laws relegated to the oblivion where now repose the statutes which were once intended to "protect" the citizens of that enlightened Commonwealth from the evil machinations of sorcerers and witches."

J. H. BAXTER, M. D., SURGEON GENERAL OF THE UNITED STATES ARMY.

Having used the utmost efforts of our limited abilities in the past to secure the appointment of this eminently qualified and highly distinguished medical officer and gentleman, to the position now accorded him, and which he will so well fill, it is a pleasure indeed to heartily endorse the following editorial in *The New York Medical Journal*, of Aug. 23. It is certainly to be hoped that the wearers of the senatorial toga will hasten to confirm.

"The President has sent to the Senate the nomination of Colonel Jedediah H. Baxter to be surgeon-general of the army, to fill the vacancy caused by the retirement of Surgeon-General John Moore. Colonel Baxter entered the volunteer service in June, 1861, as surgeon of the Twelfth Massachusetts Infantry, was appointed surgeon of United States Volunteers in April, 1862, and was promoted successively to the ranks of brevet lieutenant-colonel and brevet colonel, the latter in March, 1865, his promotions having been made on account of faithful and meritorious services in the field. In July, 1867, he was appointed Assistant Medical Purveyor in the regular army with the rank of Lieutenant-Colonel, and was made Chief Medical Purveyor in March, 1872, being promoted to the rank of colonel in June, 1874. The experience of twenty-three years which Colonel Baxter has had in the administrative bureau of the medical department of the army has given him an exceptional fitness for the office of its chief

adminisitrator, and the knowledge that he has acquired of the medical needs of the army will, if his nomination is confirmed by the Senate, be of inestimable value to that arm 'of the service. It is true that other medical officers have a strong claim to the office of surgeon-general by reason of their longer term of service; for, although the ranking colonel, Dr. Baxter's term of service has been much shorter than the terms of several of the officers now in that corps. Nevertheless, with a view only to the fitness of a candidate for the office to which he is nominated, we believe that Colonel Baxter far outranks all others, and for the good of the service we hope to see his appointment confirmed."

METHOD OF HANDLING AN EPIDEMIC OF SMALLPOX IN SOUTH AFRICA.

It may possibly be of interest to medical men to briefly recapitulate the means taken three years ago at Cape Town, South Africa, to control a terrible outbreak of smallpox.

1. On the first appearance of the disease, which originated amongst the Malays, the municipality bought a farm of 100 acres, ten miles out of the city; erected tents and removed all cases there.

2. A *cordon sanitaire* around each infected dwelling was placed and maintained till the premises were thoroughly disinfected.

3. Vaccination was made compulsory, and any interference with members of the vaccinating staff was heavily punished by both fine and imprisonment.

4. The whole city was thoroughly cleansed and strictly quarantined against country towns till the epidemic subsided. This prevented the disease being general throughout the colony..

The scourge was very fatal amongst the colored classes, Malays especially suffering. Whites who had been vaccinated escaped almost scot free. As high as 130 fresh cases were reported when the epidemic was at its height, and three ambulances were run night and day taking patients to the farm.

THE AMERICAN GYNECOLOGICAL SOCIETY will hold its fifteenth annual meeting in Buffalo, Tuesday, Wednesday and Thursday, September 16, 17 and 18, 1890.

LISTERINE.—The *British Medical Journal* of May 3d, 1890, says: "We have received * * a specimen of a preparation manufactured by the Lambert Pharmacal Company, St. Louis, U. S. A. According to the formula given, it contains the following antiseptics: Thyme, eucalyptus, baptisia, gaultheria, mentha arvensis and benzo-boracic acid. It is a clear liquid, with an aromatic odor, pungent taste, and miscible in all proportions with water. We have experimentally proved that it is a powerful antiseptic, preventing the development of bacteria and decomposition of vegetable infusions. Listerine is certainly a very elegant preparation, and will be found an agreeable antiseptic either for internal or external use." It is certainly satisfactory in the extreme to note the appreciation that the efforts of American pharmacists meet with abroad. Testimony of the character given by the *British Medical Journal* should carry very great weight with it.—*Occidental Medical Times*, June, 1890.

THE MISSISSIPPI VALLEY MEDICAL ASSOCIATION will hold its sixteenth annual session at Liederkranz Hall, Louisville, October 8, 9, 10, 1890. A large number of prominent men in medicine in the Mississippi Valley have signified their intention of being present and taking part in the programme. Dr. John A. Wyeth, of New York, and Dr. Frank Woodbury, of Philadelphia, will be present and read papers. The social programme will be all that can be wished. The ladies accompanying physicians will be made especially welcome, and it is to be hoped that a number of them will be present. Science by day and social enjoyment by night will be the order of business. The President of the Association is Dr. Joseph M. Mathews, Louisville; Secretary, Dr. E. S. McKee, of Cincinnati; Chairman Committee of Arrangements, Dr. I. N. Bloom, Louisville. The American Rhinological Association will meet in the same place the same week.

PAPINE:—John Muir, M. D., Member College Physicians and Surgeons, Ontario, Canada, ex-Vice-President Ontario Medical Council, says.

"I take pleasure in saying that I have found Papine (Battle) prompt, efficacious, and—better still—unobjectionable as to after effects. A patient, more than usual intolerant of other preparations of opium, has borne it well, and derived manifest benefit from its use."

"A SUCCESSFUL MAN" is the title of what is probably the brightest American story—typically American—which has appeared for many years. It is a story of life prominent in fashion and in politics, written by a member of New York's highest society who displays a genius as a writer destined to make her name famous—although she substitutes a *nom de plume* for her own well known one.

"A Successful Man" will appear in two parts in the *Cosmopolitan Magazine*—the first in the September issue—and is illustrated by Harry McVickar, the drawings being made from life from acting models who were guests and servants at a Long Island country house.

LIPSCOMB, MAURY CO., TENN., June 3, 1889.

ELI LILLY & CO., Indianapolis, Ind.—I want to tell you of two cases of syphilis I have relieved by the administration of Succus Alterans, prepared by you.

In the first case, the patient was confined to his bed and apparently at death's door. The scrotum had sloughed off, leaving the testicles hanging naked. I put him on your Succus Alterans and now, after taking two bottles, he is up at work. The scrotum has formed anew and covered the testicles completely. I had but little hope of his recovery when he commenced the use of Succus Alterans.

The second case, being a full brother to the first, was in almost as desperate a condition, and, he, too, has improved very rapidly under the same treatment.

It is a remarkable alterative and anti syphilitic.

Yours truly,

R. P. RUPE, M. D.

THE AMERICAN PUBLIC HEALTH ASSOCIATION will hold its eleventh annual meeting at Charleston, S. C., Tuesday, Wednesday, Thursday and Friday, December 16, 17, 18 and 19, 1890. Additional notice hereafter.

NERVOUS ANÆMIA.—

R Syr. Hypophos. Comp.....4 oz.

Celerina [Rio].....4 oz.

M. Sig.—Teaspoonful three times a day.

PONCA COMPOUND has given such excellent results in four cases of serious menstrual troubles, that I shall always prescribe it in the future for complaints of that character.

L. VON BUESCHER, M. D.,

Brooklyn, N. Y.

NUTROLACTIS.—We have now been using this preparation for one year, and our confidence in it grows steadily with each case for which we prescribe it. The recommendations from others gave us confidence at the start, but our own experience has made it, with us, as near a specific as a galactagogue, as remedies ever get to be in any condition. We have used it in twenty-four cases with but one failure.

F. L. SIM, M. D.,

January, 1890.

Editor Memphis Medical Monthly.

HAYDEN'S VIBURNUM COMPOUND: Dr. P. Bryce, of Alabama, in a recent letter to Dr. Hayden, says; "I want to say that Hayden's Viburnum has been a standard remedy in the Alabama Insane Hospital for several years past, and for the class of diseases for which it is recommended, we have found no agent so safe and reliable."

SANDER & SONS' Eucalypti Extract (Eucalytol.)—Apply to Dr. Sander, Dillon, Iowa, for gratis supplied samples of Eucalyptol and reports on cures affected at the clinics of the Universities of Bonn and Griefswald.

Correspondence.

WHOSE EARS ARE THE LONGEST?

THE CHICAGO HERALD,
Daily, Sunday and Weekly.
120 AND 122 FIFTH AVENUE,
CHICAGO, ILL.

Editorial Department.

August 6, 1890.

DEERING J. ROBERTS, M. D., Nashville, Tenn.

Dear Sir.—In the August number of your journal you have put yourself to the trouble of showing again what the world has known for some time—that you are an ass. In my note to the Association Journal of July 5, I said, as you quote, "so far as I know such a suggestion had not been made before." That was strictly true. I plead guilty to the charge of ignorance in regard to Dr. Cox's article of 1871. My ignorance will wear off, but your assininity, being a part of your nature, will stick to you through life.

I made no misstatement of fact. What I said was written with the idea that some such suggestion might have been made before, and I was careful not to make an unequivocal claim to the suggestion. Had you not mailed a copy of your cross-roads sheet to me I should take no notice of you or of the article. But as you did send me a copy, I presume you wished to notify me that you are doing business as a jackass at the same old stand. I am,

Very truly yours,

WM. G. EGGLESTON.

CONTENTS FOR SEPTEMBER, 1890.

ORIGINAL COMMUNICATIONS :—

Fallacies in Medicine. By J. S. Cain, M. D	363
Chronic Indolent Ulcers of the Leg. By W. F. Drummond, M. D.	374
Pulmonary Actinomycosis. By E. S. McKee, M. D . . .	378

SELECTIONS :—

Modern Surgery	380
The Relation of Mastication to Physical Development . . .	382
Coca in Hoarseness of Professional Singers	385
The Local Treatment of Diphtheria and Scarlet Fever Throat.	387
The Treatment of Cystitis in Women	388
Fractured Thigh; Easy Method of Treatment without Long Splint or Pulley	389
Vegetable Alterative	390
Labyrinthine Deafness	390
Rhubarb as a Cause of Hæmaturia	391
How to Boil an Egg	392

EDITORIAL, REVIEWS, ETC:—

Book Notices	393
State Regulation of Medicine	399
J. H. Baxter, M. D., Surgeon-General of the United States Army	401
Method of Handling an Epidemic of Smallpox in South Africa	402
The American Gynecological Society	402
The Mississippi Valley Medical Association	403
The American Public Health Association	404
Nervous Anæmia	405
Editorial Items	405

THE BEST ANTISEPTIC.
FOR BOTH INTERNAL AND EXTERNAL USE.

LISTERINE.

FORMULA.—*Listerine is the essential antiseptic constituent of Thyme, Eucalyptus Baptisia, Gaultheria and Mentha Arvensis, in combination. Each fluid drachm also contains two grains of refined and purified Benzo-boracic Acid.*

DOSE.—*Internally: One teaspoonful three or more times a day (as indicated), either full strength or diluted, as necessary for varied conditions.*

LISTERINE is a well-proven antiseptic agent—an antizymotic—especially adapted to internal use, and to make all maintain surgical cleanliness—asepsis—in the treatment of all parts of the human body, whether by spray, irrigation, atomization, or simple local application, and therefore characterized by its particular adaptability to the field of

PREVENTIVE MEDICINE—INDIVIDUAL PROPHYLAXIS.

Physicians interested in LISTERINE will please send us their address, and receive by return mail our new and complete pamphlet of 40 quarto pages, embodying:

A TABULATED EXHIBIT of the action of Listerine upon inert laboratory compounds.

FULL AND EXHAUSTIVE REPORTS and clinical observations from all sources, confirming the utility of Listerine as a General Antiseptic for both internal and external use; and particularly

MICROSCOPIC OBSERVATIONS, showing the comparative value and availability of various antiseptics in the treatment of Diseases of the Oral Cavity, by W. D. MILLER, A.B., PH. D., D.D.S., Professor of Operative and Clinical Dentistry, University of Berlin, from whose deductions Listerine appears to be the most acceptable prophylactic for the care and preservation of the teeth.

Diseases of the Uric Acid Diathesis.

LAMBERT'S

LITHIATED HYDRANGEA.

Kidney Alterative—Anti-Lithic.

FORMULA.—Each fluid drachm of "Lithiated Hydrangea" represents thirty grains of FRESH HYDRANGEA and three grains of CHEMICALLY PURE Benzo-Salicylate of Lithia. Prepared by our improved process of osmosis, it is INVARIABLY of DEFINITE and UNIFORM therapeutic strength; hence can be depended upon in clinical practice.

DOSE.—One or two teaspoonfuls four times a day (preferably between meals).

Urinary Calculus, Gout, Rheumatism, Bright's Disease, Diabetes, Cystitis, Hæmaturia, Albuminuria, and Vesical Irritations Generally.

We have had prepared for the convenience of Physicians Dietetic Notes, suggesting the articles of food to be allowed or prohibited in several of these diseases.

These Dietetic Notes have been bound in the form of small perforated slips for Physicians to distribute to their patients. Mailed gratis upon request, together with our latest compilation of case reports and clinical observations bearing upon the treatment of this class of diseases.

LAMBERT PHARMACAL CO.,

314 North Main St., Saint Louis.

GOUT.

DIETETIC NOTE.—A mixed diet should be adopted, the nitrogenous and saccharine articles being used in limited amounts.

Allowed.—Cooked fruits without much sugar, tea and coffee in moderation. Alcoholic stimulants, if used at all, should be in the form of light wines, or spirits well diluted. The free ingestion of pure water is important.

Avoid.—Pastry; malt liquors and sweet wines are veritable poisons to these patients.

WAYNE'S DIURETIC ELIXIR,

COMPOSED OF BUCHU, JUNIPER, ACETATE OF POTASH, ETC.

DIURETIC AND ALTERATIVE.

INDICATIONS.—Acute and Chronic Catarrh of the Bladder. Brick Dust and Chalky Deposits in the Urine, Gravel, etc. Acute and Chronic Bright's Disease, Lumbago, and in Acute and Chronic Rheumatism.

PRESCRIBED and Endorsed by the Leading Physicians of the U. S. It is giving universal satisfaction to the profession. It seems to be ALMOST A SPECIFIC for Diseases of the Genito-Urinary Organs.

EXTRACT FROM LETTER, W. F. GLENN, M.D.,

Professor of Genito-Urinary Diseases in the Medical Department of the University of Tenn.,

No practitioner passes many days, or seldom many hours, without being called upon to prescribe for some real or imaginary disease of the kidneys. While such serious disorders as diabetes and Bright's disease, in which these organs are fatally involved, are occasionally met with, they are few as compared with the many minor affections, not only in the kidneys themselves, but on all parts of the genito-urinary tract. Catarrh of the kidneys, ureter, bladder or urethra, irritations and congestions of the various parts of the urinary apparatus, are as common as bad colds. What is more frequent than patients complaining of pain in the back, in the region of the kidneys, with or without a scant flow of urine, or a burning sensation in the neck of the bladder or urethra on voiding urine, and numbers of other similar ailments. In all forms of functional derangements of these important excretory organs the administration of a gentle but effective diuretic generally affords relief. Where an analysis of urine proves the absence of elements that would indicate serious organic lesions it is a safe and in fact a proper course, to use a remedy that will stimulate to gentle action the cells of the kidneys, thereby increasing the watery portions of the urine. Such a course will rarely fail to affect a cure.

For this purpose there is nothing superior to buchu, juniper, acetate of potash, corn silk and digitalis. The action of many of this class of remedies, such as corn silk, juniper, eucalyptus, etc., have a more or less specific influence on bladder and urethral irritations and inflammations.

Some years since my attention was attracted to a remedy styled Wayne's Diuretic Elixir, which, upon examination, I found to be a combination of acetate of potash, juniper and buchu, prepared in such a manner as not to be unpleasant, but rather agreeable to the taste and accurate in its proportions. Being easier to prescribe and by far more pleasant to the patient than the same remedies freshly mixed in the drug store, I began to use it in all irritations of the kidneys, bladder, urethra and prostate gland, and have found it to meet every indication. Now, when I desire a mild diuretic effect continued for some time, I rarely depart from this mixture. Prof. Deering J. Roberts, Surgeon to the State Prison, has been using it largely of late at the hospital of that institution, and reports it perfectly satisfactory. Numbers of others of my medical brethren, to whom I have suggested its use, have reported it thoroughly satisfactory. Case after case taken from my own and from other record books, could be cited to show its satisfactory effects, but that is hardly necessary. And while I am not an advocate of the wholesale use of all the various preparations that are now crowded upon us, at the same time, after thoroughly testing this one for some years, I feel that it will not be amiss to present its virtues to the profession. Not for any new virtues that its ingredients may possess, for they have been understood for many years, but because of its careful preparation and pleasant taste, and thereby ready utility. From the very highly satisfactory results obtained by me for the past five years, I am quite sure its use will be attended with no disappointment or regret.

EXTRACT FROM LETTER, DR. THEO. JASPER, 322 SOUTH SIXTH ST., COLUMBUS OHIO:

COLUMBUS, O., January 21, 1886.—Wayne Elixir Company—Gentlemen: Regarding your most excellent preparation, "The Wayne's Diuretic and Alterative Elixir" I am happy to say that I have used it in my practice for over two years in hundreds of cases, and in every case I used it it gave perfect satisfaction. The effect of its action can be perceived immediately, and in most cases only a small quantity, five or six ounces, was needed to effect a complete cure; it is, besides, not unpleasant to the taste, and is borne by the most delicate stomach. Truly and most respectfully yours,

THEODORE JASPER, M.D., 322 South Sixth Street.

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(2a)

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OR TASTELESS SYRUP OF AMORPHOUS QUININE. (LYON'S). FOR INFANTS AND CHILDREN.

Each Teaspoonful is equal to 2 Grains of Sulphate of Quinine.

Children take it and never know it is Medicine.

NEVER PRODUCES SICK STOMACH, and always produces the same result as the bitter quinine. In the manufacture of quinine there is left, after crystallizing the quinine, dark colored substance known as Amorphous Quinine. We have by purifying the Amorphous Quinine obtained a pure alkaloid, the active principle of the Amorphous Quinine, which we have rendered tasteless, and which is equal to Sulphate of Quinine in every respect. It is tasteless, because it is insoluble in the mouth, but dissolves readily in the acids of the stomach. We use no Tannin; no Yuba Santa, which contains a large per cent. of Tannin.

Physicians can make Tasteless Tonics for Children and Ladies by combining with the Ferripe Iron by Hydrogen, Carbonate of Iron, or Iodide of Potash.

Nashville, Tenn., Oct. 29, '85.

We have tried "Lyon's Tasteless Preparation of Quinine," and take pleasure in saying they are all that is claimed for them, and as palatable as sugar.

DUNCAN EVE, M. D.,
CHAS. C. THOMPSON, M. D.

Vernon, Ind., Jan. 25, '88.

Gentlemen:—I have tried Tasteless Quinine, with splendid result. It can be taken by children readily, and will produce the same result as the Quinine Sulph. I shall continue to use it, especially among children, and can heartily recommend it to any one desiring a palatable and reliable preparation of this drug.

W. H. STEMM, M. D.

Hickory Valley, Ark., Jan. 27, '88.

Dear Sirs:—Received samples of your Tasteless Quinine Preparations. Found them satisfactory. Am using them in all cases of children requiring quinine.

E. F. BEVENS.

Aledo, Parker County, Tex., Jan. 25, '88.

Dear Sirs:—I have used the Tasteless Syrup of Quinine sent me, and am highly pleased with it. Children and Infants take it without any trouble, and it is as effective as the Sulphate of Quinine in controlling malarial.

O. MORSE, M. D.

Air Mount, Miss., Jan. 28, '88.

Paris Medicine Co., Paris, Tenn.

Gents:—Your preparation of Lyon's Tasteless Quinine was received. I was highly pleased with the use of it. It is the only preparation of Tasteless Quinine that I find entirely satisfactory. I deem it invaluable for infants and children, and it is as efficient in its action in every way as the Sulphate.

A. LOUIS JACKSON, M. D.

Uniontown, Md., Jan. 23, '88.

Paris Medicine Co.

I received your sample of T. S. of Quinine and find it an elegant preparation. I was able to produce the full effects of quinine and at the same time had no trouble to administer it to children who generally are averse to taking it in the usual form.

L. KEMP, M. D.

Big Gully, Blount Co., Tenn., Jan. 27, '88.

Dear Sirs:—I have formed a favorable opinion of the clinical value of your Tasteless Quinine Preparations, and find it a stable, elegant and permanent preparation, and one readily taken by patients, both old and young; and its price is not prohibitory.

T. W. ROBBINS, M. D.

Jeffersontown, Ky., Jan. 23, '88.

Sirs:—I used your Tasteless Quinine and find it all that is claimed for it. Children take it as readily as if it was simple syrup, and its effect is just as satisfactory as the quinine itself. I will use it always for children and sensitive stomachs of adults.

S. N. MARSHALL, M. D.

Columbus, Ark., Jan. 25, '88.

Have found it a perfect success, especially in administering to children. My druggist ordered a supply from Messrs. Meyer Bros. & Co., St. Louis.

R. M. WILSON, M. D.

Dennis, Ky., Jan. 25, '88.

Paris Medicine Co.

Gentlemen:—I have administered your Tasteless Syrup of Quinine, and with children it more than gives satisfaction. It is the sine qua non for children, and I shall take great pleasure in recommending it to the attention of our druggist and public generally.

J. R. MCCLELLAN, M. D.

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(3B)

ALETTRIS CORDIAL

UTERINE TONIC AND RESTORATIVE.

Prepared from the Aletris Farinosa or True Unicorn and Aromatics.

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Amenorrhœa, Dysmenorrhœa, Leucorrhœa, Prolapsus Uteri, Sterility, to Prevent Miscarriage, Etc.

DOSE:—One Teaspoonful three or four times a day.

UNRIVALED AS A UTERINE TONIC IN IRREGULAR, PAINFUL, SUPPRESSED AND EXCESSIVE MENSTRUATION.

It Restores Normal Action to the Uterus, and Imparts Vigor to the Entire Uterine System.

Where women have miscarried during previous pregnancies, or in any case where miscarriage is feared, the ALETTRIS CORDIAL is indicated, and should be continuously administered during entire gestation.

CHAS. CLAY, M.R.C.S., Manor House, Dewsbury, England, says:—I find Aletris Cordial (Rio) is of great service in threatened miscarriage.

FRANCIS E. CARR, L.R.C.S., &c., Leeds, England, says:—I have tried the Aletris Cordial (Rio) in two cases of long standing dysmenorrhœa, with excellent results. One of these patients has spent a week in bed every month for two years. After all the usual remedies, I put her on Aletris Cordial, and for the last two periods she has been out and about all the time.

L. M. WATSON, M.D., Delhi, Ills., says:—I have used Aletris Cordial (Rio) in cases of dysmenorrhœa, suppressed menses and threatened miscarriage, and also, combined with Celerina, as a tonic after confinement, with the happiest results, and now I am using it on a case of leucorrhœa, with injections of S. H. Kennedy's Extract of Pinus Canadensis, and it is acting like a charm.

P. H. OWEN, M.D., Morganville, Ala., says:—I have prescribed Aletris Cordial (Rio) in several cases with the most satisfactory results, and regard it as the best uterine tonic I have met with in a professional experience of over twenty-five years. In cases of threatened miscarriage it acts like a charm. Would recommend its continuous administration in all cases when there is any indication of miscarriage.

Dr. W. BERTHELOT, Santander, Spain, says:—I have tried the Aletris Cordial (Rio), and it has seemed to me to be useful, especially in cases of dysmenorrhœa.

Dr. RASQUINET, Jupille, near Liege, Belgium, says:—I tried Aletris Cordial

(Rio) in the case of a woman who had had several miscarriages at the end of five months, and who is now again pregnant, having reached the seventh month: thanks to Aletris Cordial.

R. REECE, M. R. C. S., Walton-on-Thames, England, says:—Aletris Cordial (Rio) in painful menstruation is most valuable. A wife of a minister suffered much, and had had three miscarriages. I prescribed Aletris Cordial. She has for the first time, gone her full time, and was safely confined with a male child.

J. T. COLLIER, M. D., Brooks, Me., says:—I have used your Aletris Cordial (Rio) in cases of females at the menopause. Consider it one of the finest remedies for these cases.

Dr. GORDILLON, St. Amand, France, says: I have tried the Aletris Cordial (Rio) in a case of dysmenorrhœa. The result I obtained from the use of your preparation was excellent, better than I had obtained in the same patient by prescribing the usual remedies employed in such cases.

W. F. TOOMBS, M.D., Morrilton, Ark., says:—I have used a great deal of your Aletris Cordial (Rio) and I find it all you claim for it in amenorrhœa, dysmenorrhœa, metritis, leucorrhœa; I don't think it has an equal. I have used it in two cases of threatened miscarriage and the trouble was obviated. For a general Uterine Tonic I know of nothing superior.

R. D. PATTERSON, L. R. C. S. &c., Medical Officer, Caledon Dispensary, Co. Tyrone, Ireland, says:—I have very great pleasure in testifying to the very high opinion I hold of Aletris Cordial (Rio) in threatened miscarriage.

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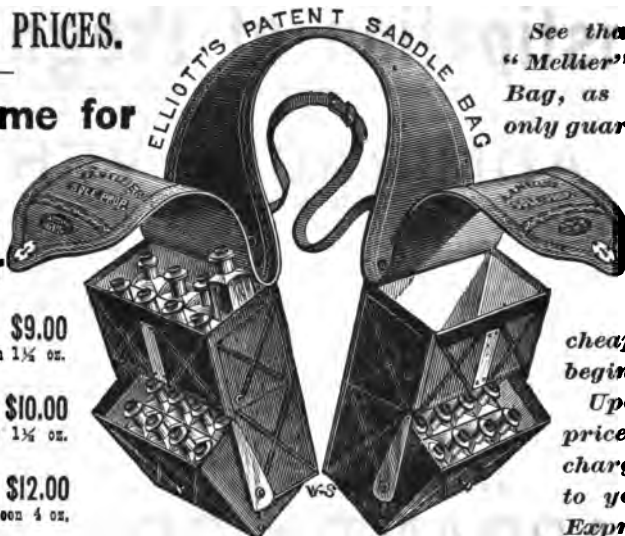
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Apart from its dietetic properties pure Norwegian Cod Liver Oil is an ALTERATIVE, A DISINFECTANT, A GERMICIDE, due to its richness in *Phosphorus Bromine and Iodine*, and a therapeutic agent of varied and extensive application, but its greatest utility depends on the form of its administration.

Almost any digestive organ can be trained to tolerate plain Cod Liver Oil to a great or less extent, but the physiology of digestion, as well as experience, shows the inability of the pancreatic fluid with other solvents of the Duodenum to Emulsify Oil to the condition of assimilation to an extent demanded in wasting diseases. Physicians recognized this fact years ago, and Chemists have since been endeavoring to solve the problem of a perfect Emulsion (*the digestion of Oil*), but not until within the last few years have we, who were first and always advanced in its manufacture, succeeded in making SCOTT'S EMULSION an absolutely perfect preparation.

In the manufacture of SCOTT'S EMULSION no chemical change whatever takes place in the Oil, but each globule is divided and subdivided into a state of minute subdivision, or until its consistency becomes that of its menstrum Glycerine and Mucilage, when its permanency is established for all time and under all conditions.

The formula for SCOTT'S EMULSION is 50 per cent. of the finest Norwegian Cod Liver Oil, 6 grains Hypophosphite of Lime and 8 grains Hypophosphite of Soda to the fluid ounce, Emulsified, or digested to the condition of assimilation with chemically pure Glycerine and Mucilage.

The permanency and efficiency of Scott's Emulsion is equaled only by its palatability. No child is so young or adult so morbidly sensitive as to find any objections to its use.

Physicians are requested to send for samples—delivered free—and compare its medicinal effects with any or all other agents upon the sick.

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A Combination of the tonic principles of *Prunus Virginiana*, Malted Barley Hypophosphites of Lime and Soda, and Fruit Juices. An elegant and efficient brain and nerve tonic.

BUCKTHORN CORDIAL (*Rhamnus Frangula*.)

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(9B)

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WHEELER'S COMPOUND ELIXIR OF PHOSPHATES AND CALISAYA. A Nerve Food and Nutritive Tonic, for the treatment of Consumption, Bronchitis, Scrofula and all forms of Nervous Debility.

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Notable Properties.—As reliable in Dyspepsia as quinine in Ague. Secures the largest percentage of benefits in Consumption and other Wasting Diseases *by determining perfect digestion and assimilation of food*. When using it Cod Liver Oil may be taken without repugnance. *It renders success possible in treating Chronic Diseases of Women and Children*, who take it with pleasure for prolonged periods, a factor essential to maintain the good will of the patient. Being a Tissue Constructive, it is the best *general utility* preparation for Tonic Restorative purposes we have, *no mischievous effects resulting when exhibited in any possible morbid condition of the system*.

When Strychnia is desirable use the following:

R Wheeler's Tissue Phosphates, one bottle; Liquor Strychniæ, half fluidrachm; *m*. In Dyspepsia with Constipation. All forms of Nerve Prostration and a good *pick-me-up* for daily use in constitutions of low vitality.

DOSE.—For an adult, one tablespoonful three times a day, after eating; from seven to twelve years of age, one dessert-spoonful; from two to seven, one teaspoonful. For infants, from five to twenty drops, according to the age. Prepared at the Chemical Laboratory of

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It is more easily digested and assimilated, and more nutritious than any Product of Cod Liver Oil in the market.

It is partially predigested, and is, therefore, more easily retained by weak and enfeebled stomachs, and cructations are less likely to follow.

It contains 50 per cent. of pure Norwegian Cod Liver Oil. The remaining percentage is composed of Milk, and an emulsion formed with Irish Moss. No gums are used in its manufacture.

It mixes readily with water and makes a pleasant drink.

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Cod Liver Oil and Milk is put up plain, and also combined with Hypophosphites. Each tablespoonful containing 2 grs. each Hypophosphites of Lime and Soda.

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DR. WILLIAM A. HAMMOND announces to the medical profession that he has returned from New York to Washington, D. C., where he has established, in a building especially erected for the purpose, a *Sanitarium* for the treatment of mild and curable cases of mental derangement, diseases of the nervous system generally, cases of the morphia and chloral habits, and such other affections as may properly be treated by the remedial agencies under his control.

The *Sanitarium* is situated on Columbia Heights at the corner of Fourteenth Street and Sheridan Avenue. The position is the highest in the immediate vicinity of Washington, the soil is dry, and all the surroundings are free from noxious influences. Electricity in all its forms, baths, douches, massage, inhalations, nursing, etc., are provided as may be required by patients, in addition to such other medical treatment as may be deemed advisable.

A large *Solarium* for sun-baths and exercise in cold or inclement weather and heated with steam in winter, is constructed on the top of the main building.

The *Sanitarium* has now been in successful operation since the 7th of January, 1889.

For further information Dr. Hammond can be addressed at The Sanitarium, Fourteenth Street and Sheridan Avenue, Washington, D. C.

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(12B)

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COCA LEAVES have been successfully used in the treatment of the Opium habit and as a remedy for the abuse of intoxicants. They are recommended in cases of mental depression and physical exhaustion, remarkable nerve-stimulant and exhilarating effects being attributed to the drug by medical authorities. OUR WINE COCA presents this drug in a palatable form, the vehicle being Pure Sherry Wine. The best *assayed* Coca Leaves are used, and we guarantee a high Cocaine percentage. Each fluidrachm equals $7\frac{1}{2}$ grains Coca.

Dose.—The dose of this wine is from a teaspoonful to two tablespoonfuls (1 flr. to 1 fl. oz.) to be taken three or four times daily or oftener.

Pint Bottles \$1.00.

We ask attention to the following statements:

LOUISVILLE, Ky., April 16, 1886.

Messrs. R. A. Robinson & Co.—Dear Sirs: It gives me pleasure to state that I have used your preparations of Hypophosphites and Wine Coca with most excellent results. The Wine Coca I used in a case of Exophthalmic Goitre. The patient has been 'bed-ridden' for three years, and it has given her more comfort than anything she has taken, and enables her to go about her room with comparative ease. The reputation of your house gives assurance that these valuable remedies are what they are represented to be, and I can recommend them both.

Yours truly,

(Signed)

T. F. SATTERWHITE.

OFFICE OF MONROE COUNTY BOARD OF HEALTH,

ANDREW J. AXTELL, M. D., Sec'y.

BLOOMINGTON, IND., August 25, 1887.

Messrs. R. A. Robinson & Co.—Sirs: I deem the following statement due you. Having been a sufferer from Nervous Headache for over forty years, at the suggestion of your Agent who called upon me in June last, with some of your samples, I was induced to try your Wine Coca for my head. Since that time I have been taking one tablespoonful each day, and have not, since I commenced the use of it, been troubled with the Headache. I have not been free from it for that length of time in twenty years. I think it will effect a permanent cure. Having tried heretofore nearly every remedy I could hear of, this is the first one that has given me any relief.

Yours respectfully

(Signed)

A. J. AXTELL, M. D.

Please Specify **ROBINSON'S.**

Robinson's Elixir Paraldehyd.

HYPNOTIC, SEDATIVE, ANODYNE.

Paraldehyd ($C^6 H^{12} O^3$) is a therapeutical agent which has been in use for the past few years only. It is formed by the action of mineral acids upon Aldehyd. ($C^2 H^4 O$.)

"In doses of forty-five grains, it is said to calm restlessness and insomnia, and procure unbroken sleep of from four to seven hours duration, and to leave behind neither languor, nausea, nor digestive disorders. It also acts as a diuretic. It has been found efficient in the INSOMNIA of various acute diseases, and also in acute MANIA, and the excited paroxysms of chronic insanity and dementia. It is proposed as possessing the good without the evil qualities of chloral" (Nat Dis., 3rd Edition, Page 151.)

It is also claimed to be a valuable ANTIDOTE to STRYCHNINE.

In delirium tremens and morphia-mania it has been used with good results.

Our Elixir contains forty-five grains of the Paraldehyd in each fluid ounce, dissolved in an aromatic menstruum, whereby the objectional taste of the chemical, to a great extent, disguised, and the preparation rendered palatable.

Dose—Two to eight fluidrachms.

Pint Bottles, \$1.50

PLEASE SPECIFY ROBINSON'S.

—FOR SALE BY DRUGGISTS.—

R. A. ROBINSON & CO.,

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MANUFACTURE ALSO

Robinson's Hypophosphites,

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FOR PROFESSIONAL USE ONLY.

Local Anæsthetic, Antiseptic, Germicide and Parasiticide.

ABSOLUTELY NON-IRRITANT.

A TRUE CHEMICAL COMBINATION OF REFINED CAMPHOR AND PURE CHLOROPHENIC ACID.

It prevents suppuration in fresh wounds, whether incised or lacerated, and controls it in wounds in all stages; its local anæsthetic property *abolishes or obtunds pain* almost immediately two qualities, which, combined, make it the *most effective antiseptic vulnerary and dressing* yet offered to the Medical Profession.

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A Chemical Compound of Chlorine and Phenic Acid. An Antiseptic and Antisymetic, for Internal and External Use, miscible with water in all proportions.

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Being soluble in water in all proportions, **Chloro-Phenique** is offered to the Medical Profession as an agent available in all cases where Bichloride of Mercury and Carbolic Acid have hitherto been used, and superior to either of them, in that it is non-poisonous and non-irritant.

We solicit the most careful and searching examination of its merits. Literature sent free and sample to any reputable Physician wishing to pay express charges. address,

PHENIQUE CHEMICAL COMPANY,
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In 97% of all cases where mother's milk is scanty or poor a copious flow of rich milk will be caused in 3 days by giving the mother "nutrolactis". Using this remedy mothers become stronger, infants thrive notably. Try it Doctor

FORMULA.—Galega officinalis, Galega apolinea, Galega Tephrosia.

See STILLE & MAISCH'S National Dispensatory.

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For further information, address

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AN OPEN LETTER TO THE MEDICAL PROFESSION.

THE INFANT FOOD PROBLEM SOLVED.

NEW YORK, May 1, 1890.

The Annual of the Universal Medical Sciences for 1889 says; "A perfect Infant Food is still a desideratum; such a food will probably be evolved in the mind of some manufacturer who understands the physiology of infantile digestion and the chemistry of milk. A substitute for human milk to approximate the latter closely should be made entirely from cow's milk, without the addition of any ingredient not derived from milk."

"But not alone do we demand that these Milk Foods contain the equivalent of the solids in human milk, and especially of the albumoids derived from milk, but that the latter be gathered with the utmost care from properly fed animals, transported with the least possible jolting to the factory, maintained during its transit at a low temperature, then transferred to an apparatus for sterilization, and immediately after the latter has been accomplished reduced to the dry state in order to prevent the formation of those organisms which Leoffer, Pasteur, and Lester have found to develop in fluid milk after boiling under an alkaline reaction. If such a preparation be put into air-tight and sterilized jars, all will have been accomplished that can be done to render the food sterile, and thus fulfil the chief indications in the prevention of the most serious gastro-intestinal derangements."

"Such a food, too, would have the advantage of being easily and readily prepared by addition of sterilized water, affording an altogether sterilized food."

To the Medical Profession at large, we submit for examination and trial the perfected Milk Food known as LACTO-PREPARATA. We claim that LACTO-PREPARATA is an ideal Infant Food, and that it fulfills the above requirements in every particular, except the partial substitution of cocoa-butter for unstable milk-fat. This substitution was made by advice of Prof. Atfield, London, who made extensive tests of its food value and digestibility in the London Hospitals for Infants.

LACTO-PREPARATA is made from cow's milk evaporated in vacuo a few hours after it leaves the udder. In order to have the product correspond in composition with breast-milk, sufficient milk-sugar is added to bring up the carbo-hydrates and reduce the albuminoids to a proper proportion (17 per cent). The casein is partially predigested (30 per cent), and the remaining portion is rendered like human milk in character and digestibility. The ingredients are perfectly sterilized and placed hermetically sealed cans; the powdering, bolting, and canning are done in an air-tight room, all air entering and leaving this room is forced by a blower through heavy layers of cotton. LACTO-PREPARATA is adapted more especially to infants from birth to six months of age; and by the addition of water alone represents almost perfectly human milk in taste, composition and digestibility.

Another product of our laboratory which has been before the profession for a number of years is CARNRICK'S SOLUBLE FOOD, which, as now prepared and perfected, contains $37\frac{1}{2}$ per cent. of the solid constituents of milk, $37\frac{1}{2}$ per cent. of wheat with the starch converted into dextrine and soluble starch, and 25 per cent additional milk sugar. For infants over six months of age it is perfect in every respect; for infants younger than this, LACTO-PREPARATA is more suitable, although Soluble Food has also been used largely from birth with the most satisfactory results.

Samples will be sent prepaid, also pamphlet giving detailed description.

REED & CARNRICK, New York.

(BB)

A Phosphorized CEREBRO - SPINANT,

(FRELIGH'S TONIC.)

FORMULA.

Ten minims of the Tonic contain the equivalents (according to the formulae of the U.S. P and Dispensatory) of

Tinct. Nux Strychnos.....	1 minim,
" Ignatia Amara.....	1 "
" Cinchona.....	4 "
" Matricaria.....	1 "
" Gentian.....	1/2 "
" Columbo.....	1/2 "
" Phosphorus, C. P.....	1-300 gr.
Aromatics.....	2 minims,

Dose: 5 to 10 drops in 2 tablespoonfuls of water.

INDICATIONS.

Paralysis, Neurasthenia, Stck and Nervous Headache, Dyspepsia Epilepsy, Locomotor-Ataxia, Insomnia, Debility of Old Age, and in the Treatment of Mental and Nervous Diseases.

One of the most widely known physicians in the country, residing in Washington, says:

"The elegance of the formula, the small dose required, and its potency go far to recommend the Tonic to the profession in that large class of neuroses so common among the brain workers in this country."

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"It will be a revelation to most physicians. I have found it peculiarly adapted to the mentally overworked Public School teachers, as well as to the worn out business man."

A Philadelphia physician says:

"Your tonic is a noble remedy. Some of my patients call it the "Elixir of Life." In Atonic Dyspepsia and as an aphrodisiac it cannot be excelled.

A Baltimore physician, whose Diploma dates from 1825, says:

"Your combination I find vastly more effective than any tonic I ever used. It furnishes a most powerful evidence of the vastly increased power of medicament by combination and judicious pharmaceutical preparation."

While an Ohio physician says:

"I have been in the profession since 1841, and must frankly say have never been much inclined to run after strange gods, but this new manipulation and combination pleases me."

The above and many similar letters from the profession can be examined at our office. Over 13,000 physicians in New England and the eastern Middle States are prescribing the Tonic regularly.

Price, One Dollar per Bottle, containing 100 of the average 5-drop doses

Physician's single sample delivered, charges prepaid, on application. That every physician may be his own judge of its value, irrespective of the opinion of others, we make the following

SPECIAL OFFER.

We will send to any physician, delivered, charges prepaid, on receipt of 25 cents, and his d or letter head, half a dozen physician's samples, sufficient to test it on as many cases for week to ten days each.

The Tonic is kept in stock regularly by all the leading wholesale druggists of the country, As we furnish no samples through the trade, wholesale or retail, for samples, directors price lists, etc., address,

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-PICHI-

FABIANA IMBRICATA.

AN EMOLLIENT, SEDATIVE AND DIURETIC IN DISEASES OF THE
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OF THE remedies which have been added to the materia medica none so thoroughly as Pichi have been proven to possess specific action in certain hitherto difficultly curable conditions.

Pichi is undoubtedly a valuable sedative and emollient in inflammation of the mucous membranes of the urinary organs. It possesses also considerable diuretic action.

In cases of vesical catarrh, acute or chronic, following a mechanical cause, such as gravel or calculus, or a uric acid diathesis, this remedy will quickly modify the urinary secretions, calm the irritability, and favor the expulsion of the gravel and calculi that can be passed through the urethra.

It favorably modifies also chronic purulent mucus secretions. Its action on the affections of the liver must be attributed to its diuretic properties, though it is recommended for icterus, hydropsy, and dyspepsia due to insufficient biliary secretions. In this case the essential oil, when absorbed and carried into the circulation, acts as a stimulant on the secretory apparatus in general, but the specific action of Pichi is directed without doubt upon the organs of the urinary apparatus.

The history of its introduction is an interesting one. Drs. Lucien Boyer, Limousin, M. Planchon, C. Paul, Dujardin-Beaumetz, and many others, have reported their favorable experience with this remedy. It is stated that Pichi was used as early as in the last century for the treatment of certain diseases of goats and sheep. According to mention by Ruiz et Pavon the peasants of Chili employed the drug empirically long ago to combat inflammation of the urinary tract, and considered it as a valuable remedy to dissolve and disintegrate calculi.

Reprints of its history, botany, chemical composition and therapeutic properties, as presented in reports from the experience of physicians in hospital and private practice, and in the Working Bulletin for the collective investigation of Pichi, will be mailed physicians requesting them.

The pharmaceutical preparations of Pichi are as follows :

FLUID EXTRACT AND SOLID EXTRACT PICHI, AND SOLUBLE ELASTIC CAPSULES PICHI.

Each capsule contains four grains of a specially prepared extract representing the active medicinal constituents of thirty grains of the drug.

The general appreciation by physicians of the great variability in preparations of Pichi, most of which have been found to be entirely worthless, and which depend wholly on the nature of the crude drug employed, has led to daily inquiries concerning the stock from which preparations are made. We therefore beg to state, for the information of physicians and pharmacists, that our entire stock of Pichi is collected for us in Chili by a special collector, located and maintained at great expense in the district that has been found to produce the best article, and that such stock consists wholly of small tops, all branches and trunks being rigidly excluded.

To physicians who have opportunity and desire to clinically test Pichi we will send a sufficient sample and literature descriptive of this drug.

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